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PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

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Apr 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000026580 (6)

	EST 143RD AVENUE	Mailing Address) AVENUE		
MIAMI FL 3317	5	MIAMI FL 33175-4329		Date Incorporated or Qualified 03/26/1996	3a. Date of Last Report
2. Principal Pi	ace of Business	28. Mailing Address		4. FEI Number 65-06509 S	Applied For Not Applicabl
Suite Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	C	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ.	Country 25	Z _I p 29	Country 30	8. This corporation has liability to Florida Statutes	or intangible tax under s. 199.032, Yes No
	9. Name and Address of Cu	urrent Registered Agent		10. Name and Address of New I	Registered Agent
AME	FRILAWYER CHARTERED		81 Name A	ARIOS Rodnieu	2
343	ALMERIA AVENUE		82 Street Add	ress (P.O. Box Number is Not Accept	
COF	RAL GABLES FL 33134		7	1720 SW 1438	·
			83		
			84 City 1 1		85 Zip Code
			1 M	imui	FL 3 2 1 7 5
	to the atomicions of factions 607	OLOO and COZ 1500 Flacida Chate	ton the shows named cor	poration submits this statement for the	purpose of changing its registere
I 1. Pyrsuanti	to the broatsions a Contions on	.0502 and 607. 1506, Florida Statu	ites, the above-hamed con		
1. Pursuant office or r agent 1.	egistered agent of both, in the S m familiar will and adoept the o	State of Florida. Such change was obligations of, Section 607.0505, F	authorized by the corporation of the corporation and statutes.	ation's board of directors, I hereby acc	cept the appointment as registered
	ogistered agent of byth, in the S m familiar valle and adoept the o	7.0502 and 607.1508, Florida Statu State of Florida. Such change was obligations of Section 607.0505, F	authorized by the corpora florida Statutes.	ition's board of directors. I hereby acc	cept the appointment as registered $4/4/61$
SIGNA WITE	perference per per per per per per per per per pe	ed agent and fille if applicable (NO	CCS 2 PTE Registered Agent signature requ	ired when reinstating)	DATE (191)
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