

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**Feb 26 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000027932 (8)

1. Corporation Name
WINDS OF CHANGE, INC.



Principal Place of Business: **6717 ROSE DRIVE MIRAMAR FL 33023**
Mailing Address: **6717 ROSE DRIVE MIRAMAR FL 33023-4652**

3. Date Incorporated or Qualified: **03/29/1996**
3a. Date of Last Report

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21 6717 ROSE DRIVE MIRAMAR FL 33023		26 6717 ROSE DRIVE MIRAMAR FL 33023-4652		18-9363592		Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 City & State		28 Miami Shores, FL		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip		29 33150		30 None		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
BROWN, JOANN E 6717 ROSE DRIVE MIRAMAR FL 33023				81 Name ALBERTO ALEJANDRO GARRIDO			
				82 Street Address (P.O. Box Number is Not Acceptable) 133 N.W. 101st Street			
				83			
				84 City MIAMI SHORES, FL 85 Zip Code 33150			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **2/20/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input checked="" type="checkbox"/> DELETE	1.1 TITLE	P/D <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BROWN, JOANN E	1.2 NAME	GARRIDO, ALBERTO ALEJANDRO
STREET ADDRESS	6717 ROSE DRIVE	1.3 STREET ADDRESS	133 N.W. 101st Street
CITY-ST-ZIP	MIRAMAR FL 33023	1.4 CITY-ST-ZIP	Miami Shores, FL 33150
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	T/S/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Pattia Jean Creelmann
STREET ADDRESS		2.3 STREET ADDRESS	133 N.W. 101st Street
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Miami Shores, FL 33150
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **2/20/97**

CR2E034 (9/96)