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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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FILED Apr 23 1997 8:00am Secretary of State

DOCUMENT # P96000028903 (8) BENVINCHY, INC.													
Principal Place of Business 9750 SW 130TH STREET MIAM FL 33176			Mailing Address 9739 SW 1300H STREET MIAMIFE 33178 S608					1 65 0 19310 9 3111 93 111	allett maset	anua siga;	18178 18011 B V II	in mis mas	
							3. Date Inc 03/27/	orporated or Qu 1996	alified	3a. Da	te of Last F	leport]
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Suite, Apl. #		יח חט	Suite	e, Apt #, etc.	TICAN	ra	<i>D D</i>	te of Status Des		<u> </u>		ot Applicable Additional	1
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ZIP FLOY		U.S.A	29 3	3139	Country 30	S.A	8. This corp Florida S	ooration has liab Statutes			tax under s No	. 199.032,	
BPatt		ddress of Current	Registered	l Agent	81	Name -	10. Name a	nd Address of	New Reg	istered #	gent		7
	CHAY, ISRAEL SW 130TH STI	REET			82	Name B &	ess (P.O. Box I	dumber in Not A	RA	BL BL			-
	I FL 33176					235	Lin	Colo	Rd	ہی "	utc	. 70>	
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•					84	City	n. Q.s	ACH		FL	85 Zip	Code	
11. Pursuant to	the provisions of	Sections 607.0503 both, in the State of accept the obliga	and 607.15	i08, Florida Statu	ites, the above	e-named corp	oration submits	this statement	for the p		changing i	ts registered	1
agent Lan	gistored agent, d i familiar with land	d accept the obliga	tions of, Sec	tion 607.0505, F	torida Statute	s.	OILS DOULD OF C	iligiciors, i rieret	у ассер	r me app	JIII(IIII)	registered	
SIGNATURE S	durative typod or profe	d name of registered agen	I and title it appli	cable. (NC	TE: Registered Age	ent signature require	ed when reinstating)			DATE			1
12.		OFFICERS AND		***************************************	13.			S/CHANGES T	O OFFIC				୍ର ହ
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CHY-ST-ZIF					6.4 CITY-5								
14. I do hereby	y certify that the in	nformation supplied	with this file	ng does not qua	lify for the exe	mption stated	i in Section 119	.07(3)(i), Florida	Statutes	. I further	certify that	the	1

4. 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 charyled, or only in attachment with an address.

SIGNATURE:

ATURE AND TYPED OF SHANTED NAME OF SIGNING OFFICER OR DIRECT

BENICHAY !

4-16-47 305-5117

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