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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 POCUMENT # P96000033310 (9)

TU PAN	ENTERPRISES, INC.						
Principal Place of Business Mailing Address					- F HODERDAR AND COLUMN MICHIEU BURKE BARLER ADDI	AI <b>QUINO</b> (1190 11400 <del>1</del> 4104 179	H DDII IDDI
10700 W. FLAGLER ST. 10700 W. FLAGLER ST. MIAMI FL 33174 MIAMI FL 33174-1422							
					3. Date Incorporated or Qualified 04/15/1996	3a. Date of Last F	Report
2. Principal P	lace of Business	2a. Mailing Address		······································	4. FEI Number	I A	pplied For
21		Suite, Apt. #, etc.		65-0696506	<b>CO 75</b> Additional		
22	#, tile	27			5. Certificate of Status Desired		Additional lequired
City & Stat	e	City & State			Election Campaign Financing     Trust Fund Contribution		May Be
Z(p)	Country 25	Ζιρ <b>29</b>	Country 30		8. This corporation has liability for Florida Statutes	intangible tax under s	s. 1 <b>9</b> 9.032,
	g. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
	RENO, IGNACIO		81	Name			
10700 W. FLAGLER ST. MIAMI FL 33174			82	Street Addre	ss (P.O. Box Number is Not Acceptal	ble)	
TANK!	MI I E GOTT		83				
			84	City		<b> 85</b> Zip	Code
	garanteen anno anno 1865 - garanteen anno 1864 - garanteen anno 1864 - garanteen anno anno 1864 - garanteen anno anno a		171			FL	
11. Pursuant office or a agent 1 a	to the provisions of Sections 607.0502 registered agent, or both, in the State c im familiar with, and accept the obligat	and 607.1508, Florida Statuti of Florida, Such change was a tions of, Section 607.0505, Flo	es, the above-lauthorized by to orida Statutes	named corpo he corporatio	oration submits this statement for the pon's board of directors. I hereby acce	purpose of changing pt the appointment as	its registered s registered
SIGNATURE	Seguicus: Type a or printed name of registered agent						۲
12,	Segmants: "An are printed name of registered agent OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	E Flegistered Agent	signature required	d when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTO	RS IN 12
ULF	\$ / D	DELETE	1.1 TITLE			Change	
NAME	MÓRENO, IGNACIO		1.2 NAME				
STREET ADDRESS	10700 W. FLAGLER ST.		1.3 STREET ADDRESS				
CHY-ST-201 Tile			1.4 CITY-ST- 21 TITLE	ZIP		Change	Addition
NAME	P/ D	Brand District Co	22 NAME			L_ Overigo	
STREET ADDRESS			2.3 STREET A	DORESS			
CHY-ST-ZF	10574 NW 51 St.MIAMI FL 33178 24		7.8 2.4 CITY-ST-	ZIP		· .	
TIFLE	VP/ D	☐ DELETÉ	3.1 TITLE			Change	Addition
NW:	GORPIN, ALVARO			DDDECC			
STREET ADDRESS.  City-St. Zip	9/21 COSTA DEL SOL BLVD		3.3 STREET AL	l l			
1016	MIAMI FL 3317	B DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET A	DDRESS			
CHY-51-702		DELETE	4.4 CITY-ST-	ZIP		T 05	Addition
BOLE		TT DETELE	5.1 TITLE 5.2 NAME			☐ Change	L. ADDIIION
NAME STREET ADDRESS			5.3 STREET A	DDBESS			}
C4Y-SI-7IP			5.4 CITY-ST-				
MUE		DELETE	6.1 TITLE		**************************************	Change	Addition
NAME	[		62 NAME	(			ļ

14. I do hereby certily 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 and cated 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

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

**FILED** 

Apr 23 1997 8:00am

Secretary of State