## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## FILED Sep 19 1997 8:00am Secretary of State

	MENT # F D MANAGEMENT		041251 (5)			YI <del>Banka biran</del> kabir diaba bilah kiri diab
Principal Plac	e of Business		Malling Address			#
HUGO HERNANDEZ 6510 NW 66 STREET MIAMI FL 33166			HUGO HERNANDEZ 8510 NW 66 STREET MIAMI FL 33166		DO NOT WRITE  3. Date Incorporated or Qualified	IN THIS SPACE  3a, Valie of Last Report
2. Principal Piece of Business 21 725/S W 825 Apt # Z Suite, Apt. #, etc.			2a. Mailing Address 26 725/Sw B254 Suite, Ant. #, etc.		05/14/1996 4. FEt Number 65-06734/	Applied For Not Applicable  \$8.75 Additional
City & State			Qy & State		6. Election Campaign Financing	Fee Required \$5.00 May Ee
B WiAMi FlA.			28 MIAMI SA		Trust Fund Contribution	Added to Fees
24 HA	25 DADE  9. Name and Address of Current		7ip 29 83.443	30 Country 30 P.	R. This corporation owes or has pai Personal Property Tax due June     Name and Address of New Reg	30. 🗌 Yes 🔁 🕏 140
11. Pursuant office or ragent. I a	registered agent, or	Nione 607.0 of a	ng 607.1508, Florida Statu porida Such change was ns of Section 607.0505, F	B4 City /// // At the above-paned cor	Plunavde 1 June of the protection's board of directors. I hereby acceptance of the protection's board of directors. I hereby acceptance of the protection's board of directors.	FL 85 Zip Code 333/43
SIGNATURE	Signature, tyllod or winded na	me of registered agent a	nd plie il applicable (NO	TE: Registered Agent signature requ	lifed when reinstating)	DAY.
12.		OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D-6- A		DELETE	1.1 TITLE	•	Change Addition
NAME	HERNANDEZ, HI			1.2 NAME		
STREET ADDRESS	8510 NW 66 STI	<b>イヒと</b> 1		1.3 STREET ADDRESS		
CITY-ST-ZIP Trile	MIAMI FL 33166		DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	JUAN RI	doon o'nd		2.2 NAME		
STREET ADDRESS	72515W	BZST ADT	#2	2.3 STREET ADDRESS		
CITY-ST-ZIP	Reineis 4	4 33/43		2. 4 CITY-ST-ZIP		
TITLE			☐ DELETE	3.1 TITLE '		Change Addition
NAME		•		3.2 NAMÉ		
STREET ADDRESS				3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE			DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME	 			4. 2 NAME		state get
STREET ADDRESS				4.3 STREET ADDRESS		
CITY-ST-ZIP				4.4 CITY - ST - ZIP		
TITLE			DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		" / /W
STREET ADDRESS				5.3 STREET ADDRESS		(x) y/w/
CITY-ST-ZIP		<del></del>	Neier	5.4 CITY-ST-ZIP		Change Acdition
TITLE .			DELETE	6.1 TITLE 6.2 NAME	50000229	Change Acdition
NAME STREET ADDRESS				6.3 STREET ADDRESS	50000229: -09/19/970109	0023
CITY-ST-ZIP		,	1	6.4 NTY-ST-ZIP	***550.00	
14. I do here	by certify that the infor on indicated on this an ifficer or director of the	nual report or pup	blomental armus reportes	ify for the exemption state true and courage and the	d in Section 119.07(3)(i), Florida Statutes at my signature shall have the same legal ort as required by Chapter 607, Florida St	leffect as if made under oath; that