

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

PROFIT CORPORATION ANNUAL REPORT 1997



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

FILED

98 OCT -2 PM 12:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000041666 (4)

1. Corporation Name  
- ARMANDO M. MONTERO AND ASSOCIATES, P.A.

Principal Place of Business  
4942 S.W. 140 AVENUE  
MIAMI FL 33175

Mailing Address  
4942 S.W. 140 AVENUE  
MIAMI FL 33175-4809

3. Date Incorporated or Qualified  
05/14/1996

3a. Date of Last Report

4. FEI Number  
09-0672069

Applied For  
 Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes  Yes  No

2. Principal Place of Business

21 6841 SW. 73 Ct.  
Suite, Apt #, etc.

22 City & State  
MIA. FL.

23 Zip Country  
33143

2a. Mailing Address

26 6841 SW. 73 Ct.  
Suite, Apt #, etc.

27 City & State  
Miami Fla.

28 Zip Country  
33143

9. Name and Address of Current Registered Agent  
MONTERO, ARMANDO M  
4942 S.W. 140 AVENUE  
MIAMI FL 33175

10. Name and Address of New Registered Agent

81 Name  
MONTERO, ARMANDO, M.

82 Street Address (P.O. Box Numbers Not Accepted)  
6841 SW. 73 Ct.

83

84 City  
Miami

85 Zip Code  
FL 33143

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the undersigned officer or director, jointly or jointly in the State of Florida, in which this corporation was incorporated by the agent, I am hereby accepting the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSTD	TITLE	
NAME	MONTERO, ARMANDO M	1 NAME	
STREET ADDRESS	4942 S.W. 140 AVENUE	1 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33175	1 CITY-ST-ZIP	
TITLE		2 TITLE	
NAME		2 NAME	
STREET ADDRESS		2 STREET ADDRESS	900002658239--6
CITY-ST-ZIP		2 CITY-ST-ZIP	-10/07/98--01096--004
TITLE		3 TITLE	***150.00 ***150.00
NAME		3 NAME	
STREET ADDRESS		3 STREET ADDRESS	
CITY-ST-ZIP		3 CITY-ST-ZIP	
TITLE		4 TITLE	
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		5 TITLE	
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 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)(f), 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 I had signed in person; 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 in an attachment with an address.

SIGNATURE: *Armando M. Montero*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FORM 1000 02/774