

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

FILED
Mar 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000042078 (1)

1. Corporation Name

SLATE INVESTMENTS, INC.

Principal Place of Business

C/O - OTERO-MULLIN & TOMLIN, P.A.
75 VALENCIA AVENUE - FOURTH FLOOR
CORAL GABLES FL 33134

Mailing Address

C/O - OTERO-MULLIN & TOMLIN, P.A.
75 VALENCIA AVENUE - FOURTH FLOOR
CORAL GABLES FL 33134-6141



2. Principal Place of Business 21 4160 W 16th Avenue Suite, Apt. #, etc. 22 302 City & State 23 Hialeah, Florida Zip 24 33012	2a. Mailing Address 26 4160 W 16th Avenue Suite, Apt. #, etc. 27 302 City & State 28 Hialeah, Florida Zip 29 33012	3. Date Incorporated or Qualified 05/16/1996 3a. Date of Last Report Applied For Not Applicable 4. FEI Number 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
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9. Name and Address of Current Registered Agent -OTERO-MULLIN & TOMLIN, P.A. 75 VALENCIA AVENUE FOURTH FLOOR CORAL GABLES FL 33134	10. Name and Address of New Registered Agent 81 Name Arturo F. Hernandez 82 Street Address (P.O. Box Number is Not Acceptable) 4160 West 16th Avenue # 302 83 84 City Hialeah 85 Zip Code FL 33012
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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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* February 14, 1997
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP 1. ROSA, ALDO C/O 75 VALENCIA AVENUE 4TH FLOOR CORAL GABLES FL 33134 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE Director 1.2 NAME Aldo Rosa 1.3 STREET ADDRESS 4160 West 16th Avenue # 302 1.4 CITY-ST-ZIP Hialeah, Florida 33012 2.1 TITLE Director 2.2 NAME Silvana DI Michele-Rosa 2.3 STREET ADDRESS 4160 West 16th Avenue # 302 2.4 CITY-ST-ZIP Hialeah, Florida 33012 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP
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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]* Feb. 14, 1997 (305) 825-0988

CR2E034 (9/96)