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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business



appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000046243 (7)

CONCHITA CAFETERIA CORP. II.

Suite, Apt. #, etc. 27 City & State City & State City & State City & State Country Country Suite, Apt. #, etc. 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,	837 AW 1ST ST #2 MIAMI FL 33130		837 NW 1ST ST., #2 MIAMI FL 33128-1328						
Suite, Apt #, etc Suite,						05/31/1996	3a. Date o	Last Report	
Suite, Apt. #, etc. 27 20	2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		Applied	J For
22 28 29 29 29 20 29 30 20 5. Country 20 20 20 5. Country 20 20 20 20 20 5. Country 20 20 20 20 20 5. Country 20 5. Co	21					65-0675764			·
28 29 20 29 30 29 30 29 30 30 30 30 30 30 30 3	Suite, Apt. #, etc 22		27						
Zop	City & State	9	<u>├</u> ─┐						
28		Country		Country					
DAVILA HORTENCIA C 837 NW 1ST ST. #2 MIAMI FL 33130 ### City FL #85 Zip Code ### City FL Zip F	24			30		Florida Statutes Yes No			,
837 NW 1ST ST., #2 MIAMI FL 33130 84 City FL 85 Zvp Code 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 expellence of expent, or both, at the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or expellence of expent was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or expellence of expent was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or expellence of expent was authorized by the corporation's board of directors. I hereby accept the appointment as registered office of expent was authorized by the corporation's board of directors. I hereby accept the appointment as registered office of the expention of the expension of the expensio			ent Registered Agent			10. Name and Address of New Registered Agent			
### City ###				8	1 Name				
MIAMI FL 33130 83				8	2 Street Add	Iress (P.O. Box Number is Not Acceptate	ole)	·····	
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 rejected agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the dappointment as registered agent and marrial with, and accept the obligations of, Section 607 0505, Florida Statutes SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. DAVILA, HORTENCIA C 837 NNY 1ST ST., #2 13. STRET ADDRESS CITY-ST./P 10. DAVILA, ROGER 12. MAM 13. STRET ADDRESS CITY-ST./P 10. DAVILA, HORTENCIA C 837 NNY 1ST ST., #2 13. STRET ADDRESS CITY-ST./P 10. DAVILA, ROGER 12. MAM 13. STRET ADDRESS CITY-ST./P 10. DAVILA, ROGER 12. MAM 13. STRET ADDRESS CITY-ST./P 10. DAVILA, HORTENCIA C 13. STRET ADDRESS CITY-ST./P 10. DAVILA, ROGER 13. STRET ADDRESS CITY-ST./P 10. DAVILA, ROGER 13. STRET ADDRESS CITY-ST./P 10. DAVILA, ROGER 13. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 13. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 13. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 13. STRET ADDRESS CITY-ST./P 10. DELETE 11. TITLE 12. MAM 13. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 13. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 13. STRET ADDRESS CITY-ST./P 10. DELETE 10. DELETE 11. TITLE 10. DELETE 11. TITLE 10. DELETE 12. TITLE 13. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 13. STRET ADDRESS CITY-ST./P 10. DELETE 13. STRET ADDRESS CITY-ST./P 10. DELETE 15. TITLE 16. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 15. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 15. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 15. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 16. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 17. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 17. STRET ADDRESS CITY-ST./P 10. DAVILA ROGER 18. CITY-ST./P 19. CITY ST./P 10. DAVILA ROGER 19. CITY ST./P 10. DAVILA ROGER	MIAI	MI FL 33130				· · · · · · · · · · · · · · · · · · ·	···		
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 agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent to minimize with an adversery the objection 607 0505, Florida Statutes. SIGNATURE Signature Training with an adversery the objects agent active i applicator. (NOTE Registered Agent agenture required spent remaining) DAYILA, HORTENCIA C SIRET ADDRESS CITY-ST-2P MIAMI F1 33130 14 CITY-ST-2P MIAMI F1 33130 15 CITY-ST-2P MIAMI F1 33130 16 Change Addition DAYILA, ROGER 1729 NW 19TH TER, #3 25 STREET ADDRESS CITY-ST-2P MIAMI F1 33125 17 Change Addition DELETE 31 TITLE 32 NAW 19TH TER, #3 33 STREET ADDRESS CITY-ST-2P MIAMI F1 33125 18 Change Addition Addition Addition DELETE 31 TITLE 32 NAW 19TH TER, #3 33 STREET ADDRESS CITY-ST-2P TITLE DELETE 31 TITLE 32 NAW 19TH TER, #3 44 CITY-ST-2P TITLE DELETE 31 TITLE Change Addition Addition Addition Addition SIRET ADDRESS CITY-ST-2P TITLE DELETE 31 TITLE Change Addition Addi				8	3				
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 agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent to minimize with an adversery the objection 607 0505, Florida Statutes. SIGNATURE Signature Training with an adversery the objects agent active i applicator. (NOTE Registered Agent agenture required spent remaining) DAYILA, HORTENCIA C SIRET ADDRESS CITY-ST-2P MIAMI F1 33130 14 CITY-ST-2P MIAMI F1 33130 15 CITY-ST-2P MIAMI F1 33130 16 Change Addition DAYILA, ROGER 1729 NW 19TH TER, #3 25 STREET ADDRESS CITY-ST-2P MIAMI F1 33125 17 Change Addition DELETE 31 TITLE 32 NAW 19TH TER, #3 33 STREET ADDRESS CITY-ST-2P MIAMI F1 33125 18 Change Addition Addition Addition DELETE 31 TITLE 32 NAW 19TH TER, #3 33 STREET ADDRESS CITY-ST-2P TITLE DELETE 31 TITLE 32 NAW 19TH TER, #3 44 CITY-ST-2P TITLE DELETE 31 TITLE Change Addition Addition Addition Addition SIRET ADDRESS CITY-ST-2P TITLE DELETE 31 TITLE Change Addition Addi				8	4 City		IR	5 Zip Code	
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 in familiar with, and accept the obligations of, Section 807/505/6, Florida Statutes. SIGNATURE Signature, fund or present name of inginence agent and time it applicable. QUOTE Registered Agent signature required when reliabating) DATE 12. OFFICERS AND DIRECTORS IN 12 TITLE DAVILA, HORTENCIA C BOUNDAIL, HORTENCIA C STREET ADDRESS GITY-ST-2P MIAMI FL 33130 1. COTY-ST-2P MIAMI FL 33130 1. COTY-ST-2P TITLE DAVILA, ROGER 122 NAME 22 NAME 122 NAME 122 NAME 122 NAME 122 NAME 123 STREET ADDRESS MIAMI FL 33125 2. A COTY-ST-2P TITLE DAVILA, ROGER 122 NAME 3. STREET ADDRESS COTY-ST-2P TITLE DELETE 3.1 TITLE 3.1 TITLE 3.2 NAME 3.2 STREET ADDRESS COTY-ST-2P TITLE DELETE 3.1 TITLE 3.3 STREET ADDRESS COTY-ST-2P TITLE DELETE 5.1 TITLE Change Addition Addition Addition Addition Addition Addition Addition AMM SIRRET ADDRESS COTY-ST-2P TITLE ALCOTY-ST-2P TITLE Change Addition Addition Addition Addition Addition Addition Addition Addition AMM SIRRET ADDRESS COTY-ST-2P TITLE ALCOTY-ST-2P ADDRESS COTY-ST-2P Addition Addition Addition Addition Addition Addition Addition AMM SIRRET ADDRESS COTY-ST-2P TITLE ALCOTY-ST-2P Addition ADDITIONS/CHANGES IN 12 ADDRESS ADDRESS IN 12 ADDRESS ADDRESS IN 12 ADDRESS ADDRESS IN 12 ADDRESS ADDRESS IN] ",		FL		
Charge C	office or re agent. Lai	to the provisions of sections 607.05 egistered agent, or both, in the Star m familiar with, and accept the obli	te of Florida. Such change was gations of, Section 607.0505, F	authorized l lorida Statut	oy the corpora es.	ation's board of directors. I hereby accept	or pose of cha of the appointr	ment as regis	itered
DELETE 1.1 TITLE 1.2 MAME 1.2 MAME 1.3 STREET ADDRESS 1.4 CITY-ST-2P 1.5 TITLE 1.4 CITY-ST-2P 1.5 TITLE		Signature, typed triprinted name of registered a	gent and title if applicable. (NO	TE Registered A	gent signature requ	ired when reinstaling)	DATE		
NAME SIRET ADDRESS CITY-ST-ZPP MIAMI FL 33130 DO DELETE 21 TITLE DAVILA, ROGER SIRET ADDRESS CITY-ST-ZPP NAME DAVILA, ROGER 1729 NW 19TH TER., #3 CITY-ST-ZPP DELETE 22 RAME 22 RAME 23 STREET ADDRESS CITY-ST-ZPP DELETE 31 TITLE AMME SIRET ADDRESS CITY-ST-ZPP DELETE 31 TITLE AMME SIRET ADDRESS CITY-ST-ZPP DELETE 41 TITLE Change Addition AMME SIRET ADDRESS CITY-ST-ZPP DELETE 41 TITLE Change Addition AMME SIRET ADDRESS CITY-ST-ZPP DELETE 41 TITLE Change Addition Addition AMME SIRET ADDRESS CITY-ST-ZPP DELETE 51 TITLE 52 RAME SIRET ADDRESS CITY-ST-ZPP TITLE 53 STREET ADDRESS CITY-ST-ZPP TITLE 54 CITY-ST-ZPP TITLE 55 STREET ADDRESS CITY-ST-ZPP TITLE 56 STREET ADDRESS CITY-ST-ZPP TITLE 57 STREET ADDRESS CITY-ST-ZPP TITLE 58 STREET ADDRESS CITY-ST-ZPP TITLE 59 STREET ADDRESS CITY-ST-ZPP TITLE 50 STREET ADDRESS CITY-ST-ZPP TITLE 50 STREET ADDRESS CITY-ST-ZPP TITLE 50 STREET ADDRESS CITY-ST-ZPP TITLE 51 TITLE 52 RAME 53 STREET ADDRESS CITY-ST-ZPP TITLE 54 CITY-ST-ZPP TITLE 56 STREET ADDRESS CITY-ST-ZPP TITLE 57 STREET ADDRESS CITY-ST-ZPP TITLE TITL	12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIF	RECTORS IN	12
STREET ADDRESS CITY-ST-2IP MIAMI FL 33130 14 CITY-ST-2IP DAVILA, ROGER TY29 NW 19TH TER., #3 STREET ADDRESS CITY-ST-2IP THE STREET ADDRESS CITY-ST-2IP STREET ADDRESS	TITLE	-	☐ DELETE	1.1 TITLE				Change	Addition
City-S1-2P MIAMI FL 33130	NAME			1.2 NAM	E				
TITLE DAVILA, ROGER 1729 NW 19TH TER., #3 STREET ADDRESS CITY-ST-ZP NAME STREET ADDRESS CITY-ST-ZP TITLE DELETE 31 TITLE Addition STREET ADDRESS CITY-ST-ZP TITLE DELETE 41 TITLE AMME 4.2 NAME STREET ADDRESS CITY-ST-ZP TITLE AMME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZP TITLE AMME 5TREET ADDRESS CITY-ST-ZP TITLE DELETE 5 TITLE Addition STREET ADDRESS CITY-ST-ZP TITLE DELETE 5 TITLE Addition STREET ADDRESS CITY-ST-ZP TITLE ADDRESS CITY-ST-ZP TITLE DELETE 5 TITLE Addition STREET ADDRESS CITY-ST-ZP TITLE ADDRESS TITLE	STREET ADDRESS			1.3 STRE	ET ADDRESS				
NAME STREET ADDRESS CITY-ST-7P MAMI FL 33125 CITY-ST-7P MILE DELETE 31 TITLE 32 NAME 32 NAME 33 STREET ADDRESS CITY-ST-7P TITLE 31 STREET ADDRESS CITY-ST-7P TITLE DELETE 41 TITLE Change Addition NAME 4.2 MAME STREET ADDRESS CITY-ST-7P 4.0 DELETE 4.1 TITLE CHANGE ADDRESS CITY-ST-7P 4.0 DELETE 4.1 TITLE CHANGE ADDRESS CITY-ST-7P 5.2 NAME STREET ADDRESS CITY-ST-7P TITLE CHANGE ADDRESS CITY-ST-7P TITLE CHANGE ADDRESS CITY-ST-7P ADDRESS CITY-ST-7P TITLE CHANGE STREET ADDRESS CITY-ST-7P STREET ADDRESS CITY-ST-7P TITLE CHANGE	CITY-ST-ZIP	MIAMI FL 33130		1.4 CITY	-ST-ZiP				
STREET ADDRESS CITY-ST-ZPP MIAMI FL 33125 1729 NW 19TH TER., #3 MIAMI FL 33125 2 4 CITY-ST-ZPP TITLE DELETE 3 1 TITLE 3 2 MAME STREET ADDRESS CITY-ST-ZPP 3 4 CITY-ST-ZPP TITLE NAME STREET ADDRESS CITY-ST-ZPP 10 DELETE 4 1 TITLE 1 Change Addition Addition NAME STREET ADDRESS CITY-ST-ZPP 10 DELETE 1 DELET	TITLE		☐ DELETE	2.1 TITLE				Change	Addition
CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME SIRET ADDRESS CITY-ST-ZIP DELETE 4.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP Addition STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-Z	NAME			2.2 NAM	:				
TITLE	STREET ADDRESS	-		2.3 STRE	ET ADDRESS				
NAME SIRET ADDRESS CITY-ST-ZIP TITLE SIRET ADDRESS CITY-ST-ZIP TITLE AAGDRESS CITY-ST-ZIP TITLE AAGDRE	CITY-ST-ZIP	MIAMI FL 33125		2. 4 CITY	- \$T - ZIP	· · · · · · · · · · · · · · · · · · ·			r
STREET ADDRESS CITY - ST - ZIP TITLE TITLE DELETE A.1 TITLE A.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY - ST - ZIP TITLE DELETE A.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE Addition A	TITLE		☐ DELETE	3.1 TITLE			Ц	Change	Addition
CITY-ST-7IP DELETE A.T ITILE Change Addition	NAME			3.2 NAM	:				
TITLE	STREET ADDRESS			3.3 STRE	et address				
NAME STREET ADDRESS CITY-ST-ZIP TIFLE OBLETE S.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE OBLETE S.3 STREET ADDRESS CITY-ST-ZIP TITLE OBLETE S.4 CITY-ST-ZIP TITLE OBLETE S.4 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TO be 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; the									
STREET ADDRESS CITY-ST-ZIP TIFLE A4. CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE S.1 TIFLE S.2 NAME STREET ADDRESS CITY-ST-ZIP TIFLE S.4 CITY-ST-ZIP TIFLE S.4 CITY-ST-ZIP TIFLE S.5. CITY-ST-ZIP TIFLE S.5. CITY-ST-ZIP TIFLE STREET ADDRESS CITY-ST-ZIP TIFLE S.5. CITY-ST-ZIP S.5. CITY-ST-ZIP TIFLE S.5. CITY-ST-ZIP TIFLE S.5. STREET ADDRESS CITY-ST-ZIP TIFLE S.5. STREET ADDRESS CITY-ST-ZIP TO be be overtify 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; the	TITLE		☐ DELETE				ليا	Change	Addition
CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition AME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.1 Le Change Addition Addition Addition AME STREET ADDRESS CITY-ST-ZIP 1.1 Le Change Addition Addition Addition AME STREET ADDRESS CITY-ST-ZIP 1.1 Lo 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; the	NAME			4, 2 NAM	E				
THE DELETE 5.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-ZIP THLE DELETE 6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 1.4 O 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; the	STREET ADDRESS			4.3 STRE	ET ADDRESS				
NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE NAME STREET ADDRESS CITY-ST-ZIP 6.2 NAME STREET ADDRESS CITY-ST-ZIP 6.4 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)(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; the	CITY-ST-ZIP								
STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 6.2 NAME 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 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)(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; the	TITLE		L DELETE	5.1 TITLE			L	Change	Addition
CITY-ST-ZIP TITLE DELETE 6.1 TITLE 6.2 NAME 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS 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)(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; the									
TITLE NAME STREET ADDRESS 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)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; the	STREET ADDRESS								
NAME STREET ADDRESS 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)(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; the			T brieve		·····	· · · · · · · · · · · · · · · · · · ·		Chance	Adalets
STREET ADDRESS 6.3 STREET ADDRESS 6.4 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)(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; the			☐ OFFER	1				unange 🔟	Addition
CITY-ST-ZIP 6.4 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)(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; the					ľ				
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; the	STREET ADDRESS			6.3 STRE	ET ADDRESS				
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; the		and the the transfer and the contraction and t	ind with this files does not are			d in Contine 110 07/0V/). Figure Contine	A Library	edido, discord also	
	informatio	ri indicated on this annual report or	r supplemental annual report is:	true and ac-	curate and tha	at my signature shall have the same lega	al effect as if m	nade under o	ath; that

ROBER DAVILA Sea. 01/24/97 (305) 541-5088