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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000048310 (2)

## FILED May 05 1997 8:00am Secretary of State

Principal Pla 8604 N.W. 87 MIAMI FL 331		Mailing Address 8004 N.W. BYH STREET MIAMI FL 33126-5901	the second second						
					3. Date Incorporate 06/03/1996	ed or Qualified	3a. Dai	te of Last F	leport
	Place of Business	2a. Mailing Address			4. FEI Number	12668		<del>}</del>	pplied For ot Applicable
21 Suite, Ap	ul #, etc	Suite, Apt. #, etc	· · · · · · · · · · · · · · · · · · ·		5. Certificate of Sta			\$8.75	Additional equired
22   City & St. 23	ate	City & State			6. Election Campai Trust Fund Conte	•		\$5.00	May Be to Fees
Zip 24	Country 25	Zip 29	Country 30	/	This corporation     Florida Statutes	has liability for i	intangible t	lax under s	
<u>:41</u>	9. Name and Address of Curre		1301		10. Name and Add				
DEL CASTILLO, ERNESTO 8604 N.W. 8TH STREET				DEL	CASTILLO, JOPGE EPNESTO Address (P.O. Box Number is Not Acceptable)				
Mil	AMI FL 33126		B3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					· · · · · · · · · · · · · · · · · · ·
			84	City			FL	85 Zip	Code
SIGNATURE	it to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with and accept the oblig Styrative, typed or per bio name of registered ag	est and title it appropable. (NC	)TE: Registered Age		required when reinstating)		DATE		
12. 100	PD OFFICERS AN	D DIRECTORS	13.						
		I I DELETE	11 TTLF	····-	ADDITIONS/CHAI	NGES TO OFFIC			
STREET ADDRESS	DEL CASTILLO, ERNESTO 8604 N.W. 8TH STREET	☐ DELETE	1.1 FTLE 1.2 NAME 1.3 STREET	ADDRESS	DEL CASTILLO, 3		1	Change	RS IN 12 Addition
STREET ADDRESS CITY: ST-ZIP TIPLE	DEL CASTILLO, ERNESTO 8604 N.W. 8TH STREET MIAMI FL 33126 VD	☐ DELETE	1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE	ADDRESS			1	Change	
STHEET ADDRESS CITY - ST - ZIP TIME NAME STIFFET ALDRESS	DEL CASTILLO, ERNESTO 8604 N.W. 8TH STREET MIAMI FL 33126 VD BRICENO, NESTOR 10500 S.W. 108 AVENUE		1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET	I ADDRESS ST - ZIP I ADDRESS			1	Change	Addition
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. 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 emowered 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:

IGNATURE AND TYPES OF PHINTED NAME OF SIGNING OFFICER OR DIRECTO

04/22/47 (305)59