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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000051926 (9) DOCUMENT #

J. BOLADO AT THE FALLS, INC.

Principal Plac 8888 S.W. 136 NO. \$98 MIAMI FL 331		Mailing Address 8888 S.W. 136TH ST. NO. 398 MIAMI FL 33176-5801	8888 S.W. 136TH ST. NO. 398		*) DO 1102 1 10 10 10 11 11 11 11		
					 Date Incorporated or Qualified 06/18/1996 	3a. Date of Las	Report
21	Place of Business	2a. Mailing Address 26			4. FEI Number 66 - 0677/69	 	Applied For Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State		City & State	ı		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	25 29 30		Count	ry	8. This corporation has liability for intargible tax under s. 199.032, Florida Statutes		
0.0	9. Name and Address of Curre	ent Registered Agent		1 Name	10. Name and Address of New Re	distered Agent	
SUTTON, JOHN O PA 2655 Lejeune road							
	VTHOUSE II		8	2 Street Add	ress (P.O. Box Number is Not Acceptab	le)	
CORAL GABLES FL 33134			8	3			
			6	4 City		 85 Z	p Code
						FL	
11. Pursuant office or rapent. La	to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the oblig	02 and 607.1508, Florida Statu te of Florida. Such change was gations of, Section 607.0505, F	utes, the abo authorized forida Statut	ve-named corp by the corporal es.	poration submits this statement for the p tion's board of directors. Thereby accep	urpose of changing I the appointment	its registered as registered
SIGNATURE							
12.	Signature, typed or printed name of registered as OFFICERS At	gent and title if applicable (IsC ND DIRECTORS	TE: Registered A	gent signalure requi	rod when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE.	ODC IN 10
TITLE	D	DELETE	1.1 10 (1	·	ADDITIONS/CHANGES TO OFFIC	Chang	
NAME	BOLADO, JOSE P		12 NAM	f		0	
STREET ADDRESS	8888 S.W. 136TH ST. NO. 39	98	1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33176		1 4 CITY	- S1 - ZIP			
TITLE	D D	☐ DELETE	2 1 TH LE			Chang	e Addition
NAME	BOLADO, CARLOS 8888 S.W. 136TH ST. NO. 39	00	22 NAM	1			l
STREET ADDRESS	MIAMI FL 33176	90		FT AUDRESS			
CITY-ST-ZIP TITLE	MICMITE 00170	DELETE	2 4 CITY 3 1 TITLE	- \$1 - ZIP		Chang	e Addition
NAME		L J OCIC IL	3 1 111LF	Ĭ		L_I Grang	אמטינטוו יי
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			
TITLE		DELETE	4.1 1171.1			☐ Chang	e Addition
NAME			4 2 NAM	le l		_	
STREET ADDRESS			4.3 STHE	ET ADDRESS			
CITY-ST-ZIP			4.4 CHY	- S1 - ZIP			
TITLE		☐ DELETE	5 1 11111			☐ Chang	e 🔲 Addition
NAME			5.2 NAM				
STREET ADDRESS			5.3 STRE	FT ADDRESS			
CITY-ST-ZIP				- \$1 - 7IP		· · · · · · · · · · · · · · · · · · ·	<u>, </u>
TITLE		DELETE	6111111	į		[] Chang	e [_] Addition i
NAME			62 NAM	1			
STREET ADDRESS	ł		63 STRE	ET ADDRESS			

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 fin at attachment with an address.

64 CITY-ST-7IP