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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthary

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000059911 (3)

DICOL CORPORATION

FILED Feb 27 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 9561 FOUNTAINEBLUE BLVD. #412 9561 FOUNTAINEBLUE BLVD. #412 MAIL EL 20172					E HERMINDE HIG ADAM BANK BRINI BRINI BRINI BRANI BANKA ADAM KONDI NIBRA HEN ADAM			
MIAMI FL 33172		MIAMI FL 33172			3. Date Incorporated or Qualified 07/17/1996	3a. Dat	e of Lasi	Report
2. Principal Pia		2a. Mailing Address	۸.) ۸	- A	4. FEI Number 65-068734	8	h	Applied For
21 7 / 0 7 # Suite, Apt	7 NW 500+	26 7/07 /U Suite. Apt. #, etc.	403	ost	100-000 734			Not Applicable Additional
22	r, C10-	27			5. Certificate of Status Desired			Required
City & State	m PL. 33166	City & State	FL 3	3166	6. Election Campaign Financing Trust Fund Contribution		•	May Be
Z·p	Country	Zip	Country		8. This corporation has liability for			r s. 199.032,
4	25 9. Name and Address of Curren		30		Florida Statutes 10. Name and Address of New Re		No nent	
1 COD	ONADO, NESTOR	t itagistora Again	B1	Name	10. Hamo and Addition of How the	giotor Co 7	30	
	CORAL WAY, STE. 21		90	C1 1 A 1	(0 O B. N to 1 No. 4	1-1		
	FL 33155		82	Street Add	ress (P.O. Box Number is Not Acceptat	ne)		
			83					
			84	City			85 Zi	p Code
				,	poration submits this statement for the p	<u>FL</u>		
office or re agent I an SIGNATURE	gistered agent or both, in the State i familiar with, and accept the obliga	of Florida. Such change was au itions of, Section 607.0505, Flor	uthorized by ida Statutes	the corpora	tion's board of directors. I hereby accep	ot the appo	intment	as registered
	Signature, typied or printed haine of tegrs cisid ager			nt signature requi	red when reinstating)	DATE		
12.	OF FICERS AND		13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	DPS	☐ DELETE	1.1 TITLE	<u> </u>		•	Chang	e L. Addition
NAME	MENDEZ, JORGE E 9561 FOUNTAINEBLUE BLVD.	#410	1.2 NAME	ADDRESS .				
STREET ADDRESS	MIAMI FL 33172	FYIC	1.3 STREET	\				
City - St - ZiP Title	DV 00172	DELETE	1.4 CITY-S 2.1 TITLE	1-21			Chang	e Addition
NAME	GARCIA, DAIRA		22 NAME			•		
STREET ADDRESS 9561 FOUNTAINEBLUE BLVD. #412			2.3 STREET ADDRESS					
C17.9 - S1 - 71P	MIAMI FL 33172		2. 4 CITY-5	ST-ZIP				
Tille		DELETE	3.1 TITLE				Chang	e Addition
NAME			3.2 NAME	Ì				
STREET ADDRESS:			3.3 STREET	ADDRESS				
CHY-SI-ZIP			3.4. CITY - 5	ST-ZIP	, , , , , , , , , , , , , , , , , , ,			L dere
TIME		☐ DELETE	4.1 TITLE			ı	Chang	e L. Addition
NAME			4. 2 NAME	400000				
STREET ADDRESS			4.3 STREET					
TITLE	The second secon	DELETE	5 1 TITLE	1-£IF		_	Chang	e Addition
NAME			52 NAME			,		
STREET ADDRESS			53 STREET	ADDRESS				
CITY-ST-ZiP			54 CHY-S					
THE		DELETE	61 TATLE				Chang	e 🔲 Addition
NAME			62 NAME	1				
STEELT ADDRESS			6.3 STREET	ADDRESS				
C(1Y - S1 - Z)P	y,		6.4 CITY	J-ZIP				
information Lam an off	y certify that the information supplied indicated on this annual reportor s licer or director of the corporation or i Block 12 or Biock 13 if changed, or	upplemental a viual report is tru the receiver of trustee empowe	ue and aocu area to exec	mption state trate and that tute this repo	d in Section 119.07(3)(i), Florida Statute t my signature shall have the same lega rt as required by Chapter 607, Florida S	s. I further il effect as statutes; an	certify the if made d that m	nat the under oath; tha y name
SIGNATI	URE:	PRINTED NAME OF SIGNING OFFICER	TN III)	01-23/97		dime Phone	