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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000060105 (9)

9. Name and Address of Current Registered Agent

L & V TACC SERVICE, INC.

CABRERA, PETRONILA 3333 NW 17 AVE.

MIAMI FL 33142

	Principal Place of Business	Mailing Address	- I IOONESON ELE IONIO ONIN OONI OONIN ELIN	MAINE CHAIR COIDS NOSA BOIRS EALL LOOS
	8333 NW 17 AVE. MIAMI FL 33142	3333 NW 17 AVE. MIAMI FL 33142-6164		
			3. Date Incorporated or Qualified 07/18/1996	3a. Date of Last Report
	2. Principal Place of Business	2e. Mailing Address	4. FEI Number	Applied For
	213333 NW 17M Ave	26,3333 NW 174h. Ave	650475606	Not Applical
,	Suite, Apt. #, etc.	Suite, Apt. #, etc. 27	5. Certificate of Status Desired	S8.75 Additional Fee Required
	City & State 23 MIAMI FLORIDA	City & State 28 MIAMI FLORIDA	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
	Zip Country 24 33(42 25 DADE	71p Country 29 33142 30 DADE	This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032,] Yes : \[\] No

City Zip Code

83

Name

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 obligations of. Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 96/6) Change Addition TITLE DELETE 1.1 TITLE CABRERA, PETRONILA NAME 1.2 NAME 1810 SW 24TH TERRACE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33145** 1.4 C<u>i</u>1Y - ST - ZIP CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE CABRERA, MARIA A NAME 2 2 NAME 1810 SW 24TH TERRACE STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33145** CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Addition Change TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CHY-ST-ZIP DELETE ☐ Change Addition TITLE 4 1 TITLE NAME 4 2 NAME **STREET ADD**RESS 4.3 STREET ADDRESS PINTY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 11TLE 6.2 NAME STREET TORESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP 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; 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 charged, or on an attachment with an address.

FILED

May 05 1997 8:00am

Secretary of State

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

Applied For Not Applicable