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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 28 1997 8:00am

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Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600060400 (4)

EL CID MANAGEMENT AND OPERATION, INC.

Dein eine L Den						# 58 /16 8 /10 88 /1 3		
Principal Place of Business Mailing Address					1 100412 B1 154 4611# 41511 00411 00411 001	is anna Ahri akili 4	an and say :	1301
117 N.W. 42ND AVENUE MIAMI FL 33126		117 N.W. 42ND AVENUE Miami Fl 33128-5432						
				ļ-	3. Date Incorporated or Qualified 07/18/1996	3a. Date of	Last Repor	rt
2. Principa: F	Place of Business	2a. Mailing Address			4. FEI Number	, ,	Applied	d For
21		26	·		65-0699329		Not Ap	plicable
Suite, Apt		Suite Apt. #, etc. 27			5. Certificate of Status Desired		3.75 Addit Fee Require	
City & State		City & State			Election Campaign Financing \$5.00 May Be			y Be
23 Zip		28			Trust Fund Contribution		Added to Fe	aes .
	Country	Zip	Country		8. This corporation has liability for).032,
24	25 9. Name and Address of Curr	29 ant Registered Agent	[30]		Florida Statutes [0, Name and Address of New R	Yes No		
DAD	ED, PABLO R	eni negistered Agent	81	Name	10. Name and Address of New A	agistered Agen		
117	18.W: 42ND AVE. MUNG 33128		62	Street Address	ED TABLO F	ble)		
	<i>/</i> `		63					
			84 (City MIG	•	FL 85	233 de	156
11. Pursuant office or ragent if a	to the provisions of Sections 607 0 registered agent, or both, in the Sta im familiar with land at each the obl	502 and 607 1508, Florida Stat te of Florida Such change wa igations of Section 607.0505,	utes, the above-ns authorized by the Florida Statutes.	amed corpora ne corporation	tion submits this statement for the s board of directors. I hereby acce	purpose of char pt the appointm	nging its regisent as regis	gistered stered
SIGNATURE	Signature typind or partial name of the pictorent is	igest and lite of applicable (N	OTE: Registered Agent (San	.14,1997	<i></i>	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIR	ECTORS IN	12
T TEE	D CONTRACTOR	DELETE	1.1 TITLE	The	D. DIRECTOR		hange 🔲	Addition
NAME	ISTURIZ, FERNANDO		1.2 NAME		uis VERA			
STREET ADDRESS	117 N.W. 42ND AVE.		1.3 STREET AD	DRESS	117 NW HZ	,		
CITY-ST-ZiF	MIAMI FL 33128		1.4 CITY - ST - 2	ZIP	MIAMI, FL 3314	2		
TITLE		☐ DELETE	2 1 TITLE				Change 🗀	Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREET AD			•.		
CHY-ST-ZII TITLE		DELETE	2. 4 CITY - ST-	ZIP			hanna Tim	Ladica
NAME		C) OCCCIT	3.1 TITLE				change []	Addition
STREET ADORESS			3.2 NAME	-opres				
CITY ST-ZIF			3.3 STREET AD					
TITLE		DFLETE	3.4. CITY - ST - 4.1 TITLE	ZIF		· · · · · · · · · · · · · · · · · · ·	hange	Addition
NAME.			4. 2 NAME				nange	j Audilloti
STREET ADDRESS			4.3 STREET AD	annece				
CITY - ST - ZIP			4.4 CITY - ST - 2	1				
TITLE		DELETE	5.1 TITLE	.ir			hange	Addition
NAME			5.2 NAME		•			,
STHEET ADDRESS			5.3 STREET AD	ORESS				
CITY - ST - ZiP			5.4 CITY - ST - 2	1				
TITLE		DELETE	6.1 TITLE				hange 🔲	Addition
NAMÉ			6.2 NAME				· <u> </u>	,
STREET ACURESS			6.3 STREET AD	ORESS				
	1		5.5 STILLET AD	5200				

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), Fiorida Statutes, I further certify that the

NAME OF SIGNING OFFICER OR DIRECTOR

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 on an attachment with an address