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

Mailing Address

811 E 37TH STREET

HIALEAH FL 33013-2822

PROFIT **CORPORATION** ANNUAL REPORT

1997

Principal Place of Business

811 E 37TH STREET

HIALEAH FL 33013



FLORIDA DEPARTMENT OF STATE

FILED

Jun 11 1997 8:00am

Secretary of State

1/2/27

Condra M. Mortheyn

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600063576 (8)

TAURO'S ACQUISITIONS, INC.

appears in Block 12 or Block 13 if chang

3. Date incorporated or Qualified 3a. Date of Last Report 07/29/1996 2. Principal Place of Business 26. Mailing Address 4. FEI Number Applied For 65-069 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country B. This corporation has liability for intangible tay under s 199 032 24 29 Florida Statutes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ALVAREZ. MAYRA 81 Name 811 E 37TH STREET 82 Street Address (P.O. Box Number is Not Acceptable). HIALEAH FL 33013 83 84 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 family with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE 4-28-97 one of registered agest and little if applicable (NOTE: Rispiscered Atrest signature remided when reinstation) 12. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12 96/6) ina Awarer - Presiden TITLE 1 1 III LE Change Addition NAME 1.2 NAME 811 1= 7758 STREET ADDRESS 1.3 STREET ADDRESS 3347 CITY - ST - ZIP DELETE TITLE Change 2.1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-EIP 2 4 CHY- \$1-ZIP DELETE TITLE 3 1 TULE L Addition NAME 🕳 3.2 NAME STREET ADORESS 3.3 STHEET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-7IP DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C/TY-ST- ZIP TITLE □ DELFTE S 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS .CITY-ST-ZIP 5.4 C(1Y - S1 - Z(P TITLE DELETE Change 6.1 11118 Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST- 2IP 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