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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretar, of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000065461 (1)

FIRE AND RAIN ENTERPRISES INC.

Principal Place of Business Mailing Address **8041 NW 6TH ST** 3041 NW 6TH ST MIAMI FL 83125 MIAMI FL 33125-4211 3. Date Incorporated or Qualified 3a. Date of Last Report 08/05/1996 2, Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Ant. #. etc \$8.75 Additional \Box 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 26 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RODRIGUEZ, MARI C BI 3041 NW 6TH ST 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33125 83 84 85 Zip Code 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 Signalure, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when feinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)DELETE Change Addition TITLE 11111111 RODRIGUEZ, MARI C NAME 12 NAME 3041 NW 6TH ST STREET ADDRESS 1 B STREET ADDRESS **MIAM! FL 33125** CITY-ST-ZIP 1.4 CITY - S1 - ZIP TITLE DELFTE Change Addition 2.1 TITLE 2.2 NAME STREET ADDRESS 2 \$ STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZiP TITLE DELETE 3 1 TITLE Change Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY - ST - ZIP DELETE Change TITLE 4 1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 Title NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 6.1 111LE NAME 6.2 NAME STREET ADDRESS 6.3 STHEET ADDRESS 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 eath; that I am an officer 6 director of the corporation or the receiver or truster 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 the effect with an address.

FILED

May 19 1997 8:00am

Secretary of State