## 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 # P96000069385 (8)

**OLLIVIER INVESTMENT CORPORATION** 

## FILED Jun 10 1997 8:00am Secretary of State

|  |  |   |                         |               |   |  | Î 1818ê HIJA 1818î ÎN 186         |
|--|--|---|-------------------------|---------------|---|--|-----------------------------------|
| Principal Place of Business Mailing Address                                    |  |   |                         |               |   |  | 8 1818 8 11181 #6181 BIII 1881    |
| 14732 SW 43RD LANE MIAMI FL 33183-4354  14732 SW 43RD LANE MIAMI FL 33183-4354 |  |   |                         |               |   |  |                                   |
|  |  |   |                         |               |   | 3. Date Incorporated or Qualified 3a. D 08/16/1996   | ate of Last Report                |
| 2. Principal Pl  | lace of Business                         | 20  | Mailing Address         |               |   | 4. FEI Number  | Applied For                       |
| 21   |  |   | 26                      |               |   | THE APPLIED FOR THE  | <del></del>                       |
| Sulte, Apt. #, etc.  |  |   | Suite, Apt. #, etc.     |               |   | 5. Certificate of Status Desired   | \$8.75 Additional<br>Fee Required |
| City & State   | 9  | 28  | Cily & State            |               |   | 6. Election Campaign Financing Trust Fund Contribution   | \$5.00 May Be<br>Added to Fees    |
| Zip  | Coun:                                    |   | Zip                     | Count         | ry  | 8. This corporation has liability for intangible Florida Statutes  | e tax under s. 199.032,           |
| 24]  |  | ress of Current Regi                                | stered Agent            | 1301          |   | 10. Name and Address of New Registered   |                                   |
| KAS  | S, MARK E ESQ.                           |   |                         | 8             | 1 Name                                      |  |                                   |
| 1497 NW 7TH STREET<br>MIAMI FL 33125   |  |   | ļ.                      | 2 Street      | Address (P.O. Box Number is Not Acceptable) |  |                                   |
|  |  |   | ]*                      | Z SHEEL       | Address (F.O. Box Number is Not Acceptable) |  |                                   |
|  |  |   |                         | 8             | 3   |  |                                   |
|  |  |   |                         | ā             | 4 City                                      |  | 85 Zip Code                       |
|  |  |   |                         |               |   | FL   | •     '                           |
| 11. Pursuant t   | to the provisions of Second agent, or bo | ctions 607,0502 and                                 | 607.1508, Florida Statu | les, the abo  | ve-named                                    | d corporation submits this statement for the purpose or<br>reporation's board of directors. I hereby accept the app  | f changing its registered         |
| agent. I at  | m familiar with, and ac                  | cept the obligations                                | of, Section 607.0505, F | lorida Statul | os.   | portation of our or  | Johnston de registores            |
| SIGNATURE  |  |   |                         |               |   |  |                                   |
| 12.  | Signature, typed or printed nar          | me of registered agent and lit<br>OFFICERS AND DIRE |                         | 13.           | igent signature                             | e required when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS ANI   | DIRECTORS IN 12                   |
| TITLE  | D  | OTT TOETTO THE DIVID                                | DELETE                  | 1.1 T(FL)     |   | The state of the s | ☐ Change ☐ Addition &             |
| NAME   | de la Espriella                          | A, GUADALUPE  |                         | 1.2 NAM       | E   |  |                                   |
| STREET ADDRESS   | 14732 SW 43RD                            |   |                         | 1.3 STRE      | ET ADDRESS                                  |  | {                                 |
| CITY-ST-ZIP  | MIAMI FL 33183-4                         | 1354  |                         | 1.4 CITY      | -ST-ZIP                                     |  | ្តី                               |
| TITLE  |  |   | DELETE                  | 2.1 TITE      |   |  | Change Addition                   |
| NAME   |  |   |                         | 2.2 NAM       | E   |  |                                   |
| STREET ADDRESS   |  |   |                         | 2.3 STRE      | FT ADDRESS                                  | İ  |                                   |
| CITY-ST-ZIP  |  |   |                         |               | '-ST-7IP                                    |  |                                   |
| TITLE  |  |   | ☐ DELETE                | 3.1 TITLE     |   |  | Change Addition                   |
| NAME   |  |   |                         | 3.2 NAM       |   |  |                                   |
| STREET ADDRESS   |  |   |                         |               | ET ADDRESS                                  |  |                                   |
| CITY-ST-ZIP<br>TITLE   |  |   | DELETE                  | 3.4. CHY      | '-\$1-ZIP<br>:                              | <del> </del>   | Change Addition                   |
| NAME   |  |   | Ordere                  | 4. 2 NAM      |   |  | C cuange C Addition               |
| STREET ADDRESS   |  |   |                         | ı             | E1 ADDRESS                                  |  |                                   |
| CITY-ST-ZIP  |  |   |                         | 4.4 CBY       |   | 1 /2 /2  |                                   |
| TITLE  | <del></del>                              |   | DELETE                  | 5.1 TITLE     | *   | 110,00   | ☐ Change ☐ Addition               |
| NAME   |  |   | •                       | 5.2 NAM       | F   | Pr W.  | •                                 |
| STREET ADDRESS   |  |   |                         | 5 3 STRE      | ET ADDRESS                                  | 4,16   | ļ                                 |
| CITY-ST-ZIP  |  |   |                         | 5.4 D(TY      | - ST - ZIP                                  |  |                                   |
| TITLE  |  |   | DELETE                  | 6.1 TITLE     |   | 1000022104   | Change Addition                   |
| NAME   |  |   |                         | 6.2 NAM       | E   | 1000022104<br>-06/12/97010660  | 34 T                              |
| STREET ADDRESS   |  |   |                         | 6.3 S1RE      | ET ADDRESS                                  | ***165.00  |                                   |
| CITY-ST-ZIP  | A17 A                                    |   |                         | 6.4 CITY      | - ST - ZIP                                  |  |                                   |

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 this corporation or this 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; B if changed, or on an attachingtent with any address?