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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997

DOCUMENT # P96000069865 (9)

## FILED May 15 1997 8:00am Secretary of State

Principal Place of Business 281 W. 61 PL BALEAH FL 33012	12	lailing Address 81 W. 61 PL. ALEAH FL 33012-6314		<del></del>					
						3. Date Incorporated or Qualified 08/20/1996	3a. Da	te of Last	Report
2. Principal Place of Business	2a	. Mailing Address				4. EEI Number	11	1	Applied For
1	26	Suite, Apt. #, etc.				W-06.9167	У		Not Applicable
Suite, Apt. #, etc.	27	Suite, Apr. #, etc.				5. Certificate of Status Desired		<b>+</b>	Additional Required
City & State		City & State				6. Election Campaign Financing			May Be
3	28					Trust Fund Contribution			to Fees
	Country	Zip	Coun	ntry		8. This corporation has liability for in			s. 199.032,
4 25	29	ntared Anom	30			Florida Statutes  10. Name and Address of New Reg	Yes [		·
GUTIERREZ, ELIA	Address of Current Regis	erei en wâaur	<del></del>	81 1	Name	to. Name and Address of New Meg	lieraten t	Apin	
1281 W. 61 PL.									
HIALEAH FL 33012			<b>82</b> Str		Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
			ħ	B3					
			ļ.	84 (	City			<b>65</b> Zip	Code
			į		·	oration submits this statement for the p on's board of directors. I hereby accep	FL		
SIGNATURE Signature, typed or per	ried rame of registered agent and title	1 11 (110)							
	OFFICERS AND DIRE	CTORS	TE: Registered	Agent s	signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND	DIRECTO	
ille DPT	OFFICERS AND DIRE		13.	LE	signature require			DIRECTO Change	
AME DPT GUTIERREZ,	OFFICERS AND DIRE	CTORS	13. 1.1 TITL 1.2 NAM	LE ME					
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. 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 planged, or on an attachment with an address.

**SIGNATURE** 

SIGNATURE AND TYPED OR PRINTED NAME O

INVIG OFFICER OR DIRECTOR

1/21/97 362-9139

aytime Phone #