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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

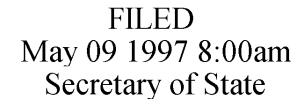
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000076408 (9)

SALAZAR GUTIERREZ INTERNATIONAL CORP.

Principal Place of Business Mailing Address 9970 N.W. 28TH TERRACE 9970 N.W. 28TH TERRACE





MIAMI FL 3317	?	MIAMI FL 33172-1336					
•					3. Date Incorporated or Qualified 09/13/1996	3a, Date of L	ast Report
	ace of Business	2a. Mailing Address		4. FEI Number	. ,	Applied For	
21		26		65-069538	7	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		. 75 Additional ee Required	
City & State		City & State			6 Francisco Constitution		
23	28			Election Campaign Financing Trust Fund Contribution	,	0.00 May Be	
Zip	Country	Z(p)	Countr	 y	8. This corporation has liability for in		
24	25	29	30			Yes 🔀 No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	lstered Agent	
HER	RERA, FILOMENA C		B1	Name			
9970	N.W. 28TH TERRACE		82 Street Add		ress (P.O. Box Number is Not Acceptab	le)	
MIA	MI FL 33172			ļ			
			83	•			
			84	City		EI 85	Zip Code
44 Purcuant	to the provisions of Spetions 607.0502	and 607 1508 Florida Statu	ites, the above	/e-named.com	poration submits this statement for the p	uroose of chang	aina its registered
office or re agent. I a	egistered agent, or both, in the State of familiar with, and accept the obligations.	of Florida. Such change was tions of, Section 607.0505, F	authorized b lorida Statute	by the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	t the appointme	ont as registered
SIGNATURE	Signature, typed or printed name of registered agen				irea when rejustating)	DATE	
12.	Signature, typed or printed name of registered agen OFFICERS AND		13.	gent signarure requ	ADDITIONS/CHANGES TO OFFIC		CTORS IN 12
TITLE	PD	DELETE	1.1 DILE			☐ Ct	
NAME	HERRERA, FILOMENA C		1,2 NAME				
STREET ADDRESS	9970 N.W. 28TH TERRACE		1,3 STREE	1 ADDRESS			
CITY-ST-ZIP	MIAMI FL 33172		1.4 CITY-	ST-ZIP			
TITLE	VD	☐ DELETE	2 1 1171.			☐ ct	nange 🔲 Addition
NAME	GUTIERREZ, MARIO ELMER		2.2 NAME				
STREET ADDRESS	9970 N.W. 28TH TERRACE		2 3 \$1RE	1 ADDRESS			
CITY-ST-ZIP	MIAMI FL 33172		2, 4 CI1Y	-S1-71 ^p			
TITLE	SD ALTERDATE MADI AND	DELETE	3.1 TINLE			☐ CI	nange [] Addition
NAME	GUTIERREZ, MARLON R		3.2 NAME				
STREET ADDRESS	9970 N.W. 28TH TERRACE MIAMI FL 33172			T ADDRESS			
CHTY-ST-ZIP	TD	DELETE	3 4. CITY 4 1 TO LE	- S1 - ZIP		TTci	nange Addition
TITLE NAME	GUTIERREZ, RONALD OMAR	L.J OLLEH	4 1 HILE 4 2 NAM			L_1 0/	Tango E Municipi
STREET ADDRESS	9970 N.W. 28TH TERRACE			1 ADDRESS			
STREET ADDRESS	MIAMI FL 33172		4.4 CITY				
TITLE	VO	DELETE	51 TITLE	01-111		□ Ci	nange 🔲 Addition
NAME	GUTIERREZ, WILLIAM A		5.2 NAME				-
STREET ADDRESS	9970 N.W. 28TH TERRACE			1 ADDRESS			
City-St-ZiP	MIAMI FL 33172		54 CHY-				
TITLE	D	DELETE	617011			CI	nange 🔲 Addition
NAME	GUTIERREZ, JIMMY NESTOR A		6.2 NAMI				
STREET ADDRESS	9970 N.W. 28TH TERRACE		6.3 STRE	ET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33172		G.4 CITY	ST-ZIP			

I do hereby certify that the information supplied with this filling 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 13 if changed, or on an attachment with an address.