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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1997

DOCUMENT # P96000076842 (9)

CADIZ ESTATES INC.

appears in Block 12 or Block,

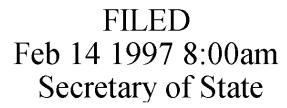
**SIGNATURE:** 

Principal Place of Business

Mailing Address

400 SW 107 AVE., STE. 308 MIAMI FL 33174

400 SW 107 AVE., STE. 308 MIAMI FL 33174-8400





2. Principal Place of Business					<ol> <li>Date Incorporated or Qualified</li> <li>09/16/1996</li> </ol>		ate of Last R <b>/ a</b>	өроп	
	2a. I	Mailing Address	~- <del>***</del> ******		4. FEI Number		·	plied For	
21 3850 S.W. 87 AVE	.#207 26	v			65-0700172			ot Applicable	
Suite, Apt. #. etc.		Suite, Apt. #, etc.					\$8.75		
22 MIAMI, FLORIDA 33	165 27	SAME			5. Certificate of Status Desired		Fee Re		
City & State	(	City & State			6. Election Campaign Financing	•	\$5.00	May Be	
23	28				Trust Fund Contribution			to Fees	
Zip Country	2	?ip	Country	,	8. This corporation has liability for i	intangible	tax under s	. 199.032	
24 25	29		30				. No		
9. Name and Address	of Current Registe	red Agent			10. Name and Address of New Re	gistered .	Agent		
Parlade, alberto j			81	Name					
3850 SW 87 AVE., STE. 207			82 Street Addr		rang (D.O. Boy Number in Not Assentan	ia)			
MIAMI FL 33165		82		Street Aug	Street Address (P.O. Box Number is Not Acceptable)				
			83					<del></del>	
			84	City		## I	<b>85</b> Zip (	Code	
11. Pursuant to the provisions of Section	n CO2 OCO2 1 CO2	1100 Fis 11 0		<u> </u>		FL			
office or registered agent, or both, in agent. I am familiar with, and accept SIGNATURE.	i the State of Florida	. Such change was a	Authorizad hi	z the corooral	tion's board of directors, I hereby accep	ot the app	ointment as	registered	
Signature, typed or printed name of r	· · · · · · · · · · · · · · · · · · ·		E: Registered Age	luper evulangia tne	(red when reinstating)	DATE			
	CERS AND DIRECT		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND		S IN 12	
THLE DPST		□ DELETE	1.1 TITLE		NPT		Change	Addition	
NAME HUERTA, MANUEL A			1.2 NAME	H	iverta, manuel a jr.				
STREET ADDRESS 400 SW 107 AVE., STE. 308			1.3 STREET	ADDRESS 4	100 SW 107 AVE., STE.	308			
\$4(\$14) E1 00474						500			
CITY-S1-ZIP   MIAMI FL 33174			1.4 CITY - S	T-7IP I M	TAMT ETARTOR 2217/				
CITY-ST-ZIP MIAMI FL 331/4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DELETE	1.4 CITY-S 2.1 T(TLE		<u>HAMI, FLORIDA 33174</u> PS	<del></del>	Change	Addition	
TITLE		DELETE	2.1 TITLE	D	PS		Change	Addition	
TITLE NAME		DELETE	2.1 T(TLE 2.2 NAME	D A	PS LBERTO J. PARLADE	207	Change	Addition	
TITLE NAME STREET ADORESS		[_] DELETE	2.1 TITLE 2.2 NAME 2.3 STREET	ADDRESS 3	OPS LIBERTO J. PARLADE 1850 SW 87 AVE., STE.	207	Change	<b>K</b> Addition	
TITLE NAME STREET ADDRESS CITY-ST-7IP			2.1 TITLE 2.2 NAME 2.3 STREET 2.4 GITY-5	ADDRESS 3	PS LBERTO J. PARLADE	207			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE		☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-3 3.1 TITLE	ADDRESS 3	OPS LIBERTO J. PARLADE 1850 SW 87 AVE., STE.	207	☐ Change	Addition	
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