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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000077055 (7)

Principal Plac	ENEGAS, P.A. De of Businass STREET. UNIT 8-202	Mailing Address 10791 SW 88 STREET, UM MIAMI FL 33176-1462	VIT B-202		
				3, Date Incorporated or Qualific 09/16/1996	od 3a. Date of Last Report
	Place of Business	2a. Mailing Address		A EEL Number	Applied For
21 // 2 : Suite, Apt.	55 5.00, 2115t.	• • • • • • • • • • • • • • • • • • • •	W 21151	65-0695353	Not Applicable
22	. Tr. OLC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	<u> </u>	City & State		6. Election Campaign Financing	\$5.00 May Bo
	iami FC	28 /1 (A)1)	Country	Trust Fund Contribution	Added to Fees
Zip 24 33 1 8	19 25 Oade	29 33189	Country	This corporation has liability Florida Statutes	for intangible tax under s. 199.032,
	9. Name and Address of Current			10. Name and Address of New	
VENEGAS, LUIS					
				Address (P.O. Box Number is Not Accep	
MIA	MILTE WOTTO		83	35 SW R/1 5	
<u> </u>			84 City .		ne 7% Codo
			1 12	liami	FL 85 Zip Code 8 3 3/89
11. Pursuant office or i	to the provisions of Sections 607,0502 registered agent, or both, in the State of	and 607.1508, Florida Statuli f Florida, Such change was a	os, the above-named authorized by the corp	corporation submits this statement for the poration's board of directors. I hereby ac	ne purpose of changing its registered coupling the appointment as registered
1	am familiar with, and accept the obligati	ions of, Section 607,0506, Flo	orida Statutos.	·	3/27/87
SIGNATURE	Signature, typed or printed hank of registered agent	and title if applicable (NOTI	E. Registered Agent's gnature	required when reinstating)	DATI
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TITLE NAME	VENEGAS, LUIS	LJ DELETE	1.1 THLE 1.2 NAME		Change Addition
STREET ADDRESS	10791-SW-88-STREET, UNIT B-	2 02	1.3 STREET ADDRESS	11255 SW 211 MIAMI, F/ 331	57.
CITY-ST-ZIP	MIAMI FL 33176		14 CITY-ST-ZIP	MIAMI El 331	89
TITLE		DELETE	21 TALE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS		1	2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE][] DELETE	2 4 CHY-ST-ZIP 3 1 THLE		Change Addition
NAME			3.2 NAME		-
STREET ADDRESS			3.3 STREET ADDRESS		İ
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TIFLE		Ditti	4.1 TITLE		☐ Change ☐ Addition
NAME Street address			4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 C/TY - S1 - Z/P		
TITLE		DELETE	5.1 7171.1		Change Addition
NAME			5.2 NAME		,
STREET ADDRESS			5 3 STHEET ADDRESS		
CITY-ST-ZIP TITLE		DELFTE	5.4 CHY-S1-74P		Change Addition
NAME		CJ PCT /C	6.2 NAME		Fit countries Fit wouldnit

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 logal 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 changed, or on an attachment with an address.

64 CHY+ \$1-7IP

6.3 STREET ADDRESS

Apr 02 1997 8:00am Secretary of State

FILED