

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 OCT 27 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P96000079079 (5)

1. Corporation Name
LINER CORPORATION

Principal Place of Business
**1601 NW 29 STREET
MIAMI FL 33142**

Mailing Address
**1601 NW 29 STREET
MIAMI FL 33142**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25		30	Country

3. Date Incorporated or Qualified 09/24/1996	3a. Date of Last Report
4. FEI Number 65-0744105	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**PEREZ, ERNESTO
1601 NW 29 STREET
MIAMI FL 33142**

10. Name and Address of New Registered Agent

81 Name **Jose A BARRIOS Jr.**

82 Street Address (P.O. Box Number is Not Acceptable)
3003 SW 18 ST

83

84 City **Miami** FL 85 Zip Code **33145**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Jose Barrios* **JOSE BARRIOS** 10-21-97 DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		DELETED
TITLE	PO PEREZ, ERNESTO	<input checked="" type="checkbox"/>
NAME	1601 NW 29 STREET	
STREET ADDRESS	MIAMI FL 33142	
CITY-ST-ZIP		
TITLE	STD PEREZ, BARBARA	<input checked="" type="checkbox"/>
NAME	1601 NW 29 STREET	
STREET ADDRESS	MIAMI FL 33142	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	Jose A BARRIOS Jr.	<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME	3003 SW 18 ST		President
1.3 STREET ADDRESS	Miami FLA 33145		
1.4 CITY-ST-ZIP			
2.1 TITLE	Lydia BARRIOS	<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME	3003 SW 18 ST		Secretary
2.3 STREET ADDRESS	Miami FLA 33145		
2.4 CITY-ST-ZIP			
3.1 TITLE	Jose A BARRIOS	<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME	3003 SW 18 ST		Treasury
3.3 STREET ADDRESS	Miami FLA 33145		
3.4 CITY-ST-ZIP			
4.1 TITLE	300002332143--0	<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME	-10/29/97--01024--001		
4.3 STREET ADDRESS	*****500.00 *****500.00		
4.4 CITY-ST-ZIP			
5.1 TITLE	300002332143--002	<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME	-10/29/97--01024--002		
5.3 STREET ADDRESS	*****58.75 *****58.75		
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 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 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 changed, or on an attachment with an address.

SIGNATURE *Jose Barrios* 9 10 97 300 (332000)

CR2E034 (4/97)