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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9600080019 (8)

ALJO INVESTMENTS CORPORATION

Principal Place of Business			Mailing Address					- {	i IIE lõise oinii oi	III OOM OOM		9941 8 9181 81 8 4	F IDIA FOOL
\$122 NORTHWEST 113 STREET HALEAH GARDENS FL 33016			P.O. BOX 4081 HIALEAH FL 33014-0081										
								09/26/		Qualified	3a. D.	ate of Last F	Report
2. Principal Pl	ace of Business	2a.	Mailing Address					4. FEI Num				Aı	oplied For
21		26						<u> </u>	-069	5836			ot Applicable
Suite, Apt.		27	Suite, Apt. #, etc.					5. Certifica	le of Status D	esired			Additional equired
City & State			City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
23	Country	28		.1	puntry						Щ		to Fees
Zip	Country	-						8. This corporation has liability for inlangible tax under s 199.032, Florida Statutes					
24	9. Name and Address of Current I	29 Beols	tered Agent	30					nd Address				
ALIE	RILAWYER CHARTERED	iog.o	torsa rigoric		81	Name			7001000	0. 14011 710;	g.5.0.00	rigoni	
	ALMERIA AVENUE				82							· · · · · · · · · · · · · · · · · · ·	
CORAL GABLES FL 33134						Stree	t Addre	oss (P.O. Box I	Number is No	1 Acceptab	le)		
	AL GABLES I E 00 104				83				· ··· · · - · · · · · · · · · · · · · ·				
N. F.					84	City					FI	85 Zip	Code
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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE													
12.	Signature: typed or printed name of registered agent. OFFICERS AND			OH Begish		at signate	re require	d when reinstaling)	NS/CHANGES	TO DESIG	DATE	DIBECTOR	20 INI 12
TITLE	PD OFFICERS AND	Dirti	DITETE		i Tiil!		172	ONIPVAL	MARNIA	(15V)		Change	Addition
NAME	SOSA, JOSEPH L				NAME		141	MEDO	ARTIBAL	4 JA	PE.	LJ Change	y_3 /100/0/
STREET ADDRESS	9122 NORTHWEST 113 STREET			- 1		ADDRESS	84	50 W. 6	8m 5t	٠,٠.	•		ì
	HIALEAH GARDENS FL 33016		•		i City - S		100	FREDO 50 W. B IALEAH	FL.	33019	7		
CITY-ST-ZIP TITLE	VSTD		DELETE		I TITLE	1.71						Change	Addition
NAME	ARTEAGA, ALFREDO A			22	NAME								
STREET ADDRESS	9122 NORTHWEST 113 STREET					ADDRESS							
CITY-ST-ZIP	HIALEAH GARDENS FL 33016			1	4 Ciliy - 3								
TITLE			DELETE		TITLE		1					Change	Addition
NAME				3.7	NAME		Ì						İ
STREET ADDRESS				3.3	STREET	ADDRESS							
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NAME				4.	2 NAME								
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CITY-ST-ZIP				4.4	CITY-S	1 - 7IP							
THIE			L.J DELETE	5.1	1 TITLE							Change	L Addition
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STREET ADDRESS				5	STREET	ADDRESS	:						
CITY-ST-ZIP					1 CITY - S	1 - ZIP						TT &	
TITLE			□ DELETE	- 1	1 TITLE							L_J Change	☐ Addilion
NAME					2 NAME								
STREET ADDRESS				l li		ADDRESS	•						
CITY-ST-ZIP	by certify that the information supplied	uzilla at	sia filian daga nat a ca		4 CHY-S	_	stated	in Cooling 110	รากวิวัติกัก Ele-	ida Ctatula	e Hurtha	or northy that	I fluo
informatio	by Centry that the imbrination supplied on indicated on this annual report or su fficer or director of the corporation or the n Block 12 or Block 13 if changed, or c	pplem ie rec	ierital annual report is eiver or trustee empo	true an owered t	d accu	irato ar	id that i	my signature s	shall have the	same lega	il effect a	s if made ur	ider oath; that