

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 JUL 18 PM 1:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000080648 (4)

1. Corporation Name
THE ENTREPRENEURS, INC.

Principal Place of Business
MALL OF THE AMERICAS
7705 W. FLAGLER ST. #8
MIAMI FL 33144

Mailing Address
MALL OF THE AMERICAS
7705 W. FLAGLER ST. #8
MIAMI FL 33144-2366

3. Date Incorporated or Qualified
09/27/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

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25

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4. FEI Number -
APPLIED FOR.

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CAMPO, YESIT J
85 GRAND CANAL DR STE 102
MIAMI FL 33144

81 Name GUSTAVO LONDONO
82 Street Address (P.O. Box Number is Not Acceptable)
7795 W. FLAGLER ST. #8
83
84 City mian FL 85 Zip Code 33144

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 *[Signature]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE * PTD
NAME CUERVO, YESIT
STREET ADDRESS 9920 N.W. 44TH TERRACE
CITY-ST-ZIP MIAMI FL 33178 ☒ DELETE

1.1 TITLE PRESIDENT ☐ Change ☐ Addition
1.2 NAME CONRADIA CUERVO
1.3 STREET ADDRESS 7795 W FLAGLER ST. #8
1.4 CITY-ST-ZIP mian FL 33144 ☐ Change ☐ Addition

TITLE * VSD
NAME BARBA, CESAR
STREET ADDRESS 770 CAUGHTON ISLAND DR.
CITY-ST-ZIP MIAMI FL 331 ☒ DELETE

2.1 TITLE V. PRESIDENT ☐ Change ☐ Addition
2.2 NAME GUSTAVO LONDONO
2.3 STREET ADDRESS 7795 W. FLAGLER ST. #8
2.4 CITY-ST-ZIP mian FL 33144 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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 *[Signature]*

[Signature] 2/2/97 (30) 2673115

CR2E034 (9/96)