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

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State 😼 DIVISION OF CORPORATIONS APPROVED AND FILED

1997 OCT 17 PM 4: 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCU 1. Corporetic HEAVY	MENT # P9600(MECHANIC 17TH AVE., IN	0081868 (7) c.			N 484 0 1848 1848 1848 1840 1840 1840
Principal Plac	ce of Business	Mailing Address	÷	1 10011001 110 (0110 OLIVE BOUT BOTT 0111	ni qerek antin dinda sadin dikan tinin kabi
2353 NW 17 AVE. 2353 NW 17 AVE.				1	
MIAMI FL 331	142	MIAMI FL 33142	J	DO NOT WRITE	IN THIS SPACE
	7			3. Date Incorporated or Qualified 10/03/1996	3a. Date of Last Report
	Place of Business	2a. Mailing Address		4. FEI Number	✓ Applied For
	3 NW 17 AVE.	26 2353 NU	1 17 AVE.	200 650634135	Not Applicable
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Mig 1		28 Migmi	FL	Trust Fund Contribution	Added to Fees
Zip 24 3 314	Country	Zip 29 33142	Country 30 U. 5 A	This corporation owes or has pa Personal Properly Tax due June Name and Address of New Re	30. Yes X No
AC	EVEDO, RAFAEL	it dealstelen våent	81 Name - 5		
2353 NW 17 AVE.			82 Street Add	Iress (P.O. Box Number is Not Accepted	JO)
	MIAMI FL 33142			NW 17 AVE.	10)
			83		
			84 City M; Gr es, the above-named cor	•	FL 85 Zip Code 3'3 1-12
	La the manifeless of Continue Carl 000	22 And COT 1609 Starida Statul	VITAL	overtion submite this statement for the c	
office or	registered igent or both in the State	of Florida. Such change was a	authorized by the corpora	poration submits this statement for the patient's board of directors. I hereby acception's	of the appointment as registered
		ntions of, Section 607 0505, Fig	orida Stat utes.	7-	2 - 97
SIGNATUR	Injutive, typed or unted name or registered ago	ent and little if applicable (NOT)	Registered Agent signature requ	ired when re-instating)	2 - 97 DATE
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	1 DP	▼ DELETE	1.1 TITLE	P	
NAME	ACEVEDO, RAFAEL 2353 NW 17 AVE.			itierrez, Juan 553 NW 17 AVE	Change Addition
STREET ADDRESS	MIAMI FL 33142		1.0 0		\
CITY-ST-ZIP	DS	DELETE	1.4 CITY-S1-ZIP // 1.1 2.1 TITLE	omi FL 33142	
TITLE NAME	GUTIERREZ, JUAN		2.2 NAME	4000023	1250745
STREET ADDRESS	2353 NW 17 AVE.		2.3 STREET ADDRESS	-10/207	3250745 97-01179-011
CITY-ST-ZIP	MIAMI FL 33142		2.4 CITY-S1-ZIP	非非非 16	5.00 ****165.0 <u>0</u>
TITLE		DELETE	3.1 THLE		Change
NAME			3.2 NAME		}
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	.)		3.4. CITY-S1-ZIP		
TOTALE		DELETE	4.1 TITLE		Change Addition
NAME	1		4. 2 NAME		
STREET ADDRESS	}		4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CRY-ST-ZIP 5.1 TITLE		Change Addition
TITLE		LJ DELLIE	5.1 MLE 5.2 NAME		La priorigo La ricomort
NAME STREET ADDRESS	1		5.3 STREET ADDRESS		\sim
CITY-S1-ZIP	1		5.4 CHY-SI-ZIP		NW
TITLE		DELETE	6.1 TALE		Chapte 5 Addition
NAME	}		6.2 NAME		~W/// "
STREET ADDRESS	\ \ \		6,3 STREET ADDRESS	•	101
CITY-ST-ZIP	1		6.4 CHY-S1-ZIP		•

14. To hereby certify that the information supplied with this filting loss not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this annual report or supplimental 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 contraction of th

SIGNATURE:

7-2-97

September 8,1997

To whom it may concern;

The reason for this letter, s to infor that Heavy Mechanic 17th AVE., Inc. never received a first notice for the 1997 profit corporation Annual report, and now I'm submitting it.

Thank you,