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

**PROFIT** CORPORATION **A**NNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000086365 (9)

CINCO Y AFUERA, INC.

Pri	ncipal	Place	of Bu	sine	\$5

8701 N.W. 7TH STREET

Mailing Address

6701 N.W. 7TH STREET

## **FILED** May 07 1997 8:00am Secretary of State



SUITE 175 MIAMI FL 33126		SUITE 175 Miami FL 33126-6008								
					3. Date incorporated or Qualified 3a. Date of Last Ro 10/18/1996			epart		
2. Principal Place of Business			2a. Mailing A				4. FLI Number			oplied For
21 6701 NW 7th STIEET						65-0467 182 341205				
Sulte, Apt. #, etc. 22 <b>Suite 175</b>		27				5. Certificate of Status Desired				
City & State	Fl	33126	City & St. 28	City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees		
کار کا		Country 25 DADE	Ζφ <b>29</b>	30	Country	•	This corporation has liability for in Florida Statutes	ntangible ta Yes 🔲		. 199,032,
		e and Address of Curr	rent Registered Age	nt		,	10. Name and Address of New Reg	Istered Ag	ent	
	VELL, JER				81	Name				
		H STREET			82	Street Add	ress (P.O. Box Number is Not Acceptable	e)	***	
	'E 175 VII FL 3311	oe Oe			83					
Milen	MI FE 99 (	EU			84	City			<b>85</b> Zip	Code
					"	Ony		FL	03 2.45	Occio
office or re agent. I as SIGNATURE	egistered a	agent, or both, in the Sta with, and accept the ob	ate of Florida. Such o ligations of, Section I	thange was autl 507 0505, Floric	horized by da Statutes	y the corpora s.	poration submits this statement for the pr dion's board of directors. I hereby accep	urpose of c t the appoi	hanging r ntment as	ts registered registered
12.	Storiature, type		ation and life, it applicable.		agistaed Age ■ 13.	of signature requ	ned when remaining)  ADDITIONS/CHANGES TO OFFIC	EDD AND I	VIDECTOR	OC (N. 10
TITLE	D			DELFTE	1 1 TITLE	I	ADDITIONS/GHANGES TO OFFIC		Change	Addition
NAME	COWELL	l, jerald r			1.2 NAME	Ì		_		
STREET ADDRESS	6701 N.	W. 7TH ST SUITE 17	75		1.3 STREET	AUDRESS				
CITY-ST-ZIP	MIAMI F	L 33126			1.4 CITY - S	S1 - ZIP				
TITLE				DELETE	2 1 7   ] [ [				Change	Addition
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NAME					5.2 NAME	-				
STREET ADDRESS					5.3 STREET	ADDRESS				
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NAME	l				62 NAME					
STREET ADDRESS					6.3 STREET	ADDRESS				i
CITY-ST-ZIP			·		6.4 C(1Y - S	1-7IP				

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 armual 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 frusted 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 attaching that an address. 0 6