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

DOCUMENT # P96000103548 (9) 1. Corporation Name

HANZE-AVILIA CORP.

Principal Place of Business

Mailing Address

FILED Mar 24 1997 8:00am Secretary of State



14875 S.W. 45 MIRAMAR FL 33		14875 S.W. 45 COURT MIRAMAR FL 33027-3333							
				j			3. Date Incorporated or Qualified 12/26/1996	3a. Date of Last Report	
	lace of Business	D	2a. Mailing Add	ress		5)	4. FEt Number	Applied For	
	1. NOB HILL	- 	25 867 N	NOB	Huu_	KOA!	65-0721935	Not Applicable	
Suite, Apt.			Suite, Apt. #		·····		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	hoi TAT	FL	City & State		FL	,	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24 333 2		Ú.S.A.	Zip 29 333	3¢ 30	Country 0 U	.s. <u></u>		Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent									
SLOTO, JAMES R						81 Name			
2350 FIRST UNION FINANCIAL CENTER 200 S BISCAYNE BOULEVARD					82	Street A	Address (P.O. Box Number is Not Acceptable)		
MIAN	VII FL 33138				83				
					84			FL 85 Zip Code	
office or re	to the provisions of Sc registered agent, or bo im familiar with, and ad	nn, in the State c	f Florida. Such cha	nge was auti	horized by	the corp	corporation submits this statement for the oration's board of directors. I hereby acceptation's	ourpose of changing its registered pt the appointment as registered	
SIGNATURE	<u> </u>								
	Slignature typed or per teo na			(NOTE: R		ant signature r	required when reinstating)	DATE	
12.	1	OFFICERS AND		ELETE	13.		ADDITIONS/CHANGES TO OFFI		
TIBLE			L., I	ELETE	1.1 TITLE		PRES.	Change 🔀 Addition	
NAME					1.2 NAME		JULIO HANZE		
STREET ADDRESS					13STREET		78 N.W. 90 ST		
CITY+S1 ZIF				5) 576	1.4 CITY-S	T-ZIP	MIAM1 FL 33138		
TITLE			[] [ELETE	2.1 TITLE		VP, SEC., TRUAS.	Change X Addition	
NAME					2.2 NAME		marlene Avila		
STREET ADDRESS					2.3 STREET	ADDRESS	14875 S.W. 45 CT.		
CITY - S1 - ZIP					2 4 CITY-	ST-ZIP	MIRAMAR FL 33027	Service Servic	
11111				ELETE	3 1 TITLE			Change Addition	
NAME					32 NAME			1	
STREET ADDRESS					3 3 STREET	ADDRESS			
CiTY+\$1-ZIP					3.4. CHTY-	ST-ZIP			
TITLE				ELETE	41 TITLE			Change Addition	
NAME					4 2 NAME				
STHELL ACORESS					4 3 STREFT	ADDRESS			
CITY - ST - 7PP					4.4 CHY-5	T-ZIP			
101f			□ D	ELETE	51 TITLE			Change Addition	
NAME					52 NAME		<u> </u>	•	
STREET ADDRESS					53 STREET	ADDRESS	90000212 -03/25/97010		
C/TY+S1+7IP					5.4 CHY-S	5 4		U3U3Z	
TELE				ELETE	61 TITLE	271	***165.00	Change Addition	
NAME			۔ ت		62 NAME	ŀ		- Salara	
STREET ADDRESS						ADDDESS		~~~~~	
ł:					63 STREET			4210	
14 Lda beret	by cortify that the infor	mation equation	with this filing doss	not qualify f	64 CITY-S		ated in Section 110 07/3\/i). Florida Statut		

recovereby certify that the information supplied with this filling 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.