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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Jan 16 1998 8:00am

	1998				ocretary o	RPORATION	is	Secretary of	Sta	te
DOCU 1. Corporation	MENT on Name YNE CARI		00050	222	(3)		Z art. s			
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Principal Plac	e of Business		Mailing	Address				{ I LOOKENUUR HILK LOOMEN AURUL AURUL AURUR BURK		1919 (161 (186)
9104 SW 70 MIAMI FL 33				SW 70 TERR I FL 33173	ACE			DO NOT WRITE IN THIS S	PACE	
								3. Date Incorporated or Qualified 06/05/1997		
2. Principal P	lace of Busin	ess) 	ling Address	\$			4. FEI Number		polied For
21 Suite, Apt.	# oto		26	te, Apt. #, etc				65-0760188		ot Applicable
22	m, CIG.		27	.e, Api. #, eii	G.			5. Certificate of Status Desired		Additional equired
City & Stat	e	<u>-, </u>		& State				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip]_	Country	Zip			Country		8. This corporation owes or has paid the curr		
24		25 and Address of Cu	29	4 Amont	30	<u> </u>		Personal Property Tax due June 30. 10. Name and Address of New Registered A		No
VE			mem negistered	Agent		81	Name	10. Name and Address of New Registered A	gent	
	ilez, arnal 5 universi							ress (P.O. Box Number is Not Acceptable)		
		ES FL 33134				82 8	street Addr	ress (P.O. Box Number is Not Acceptable)		-
						83				
						84 (City		85 Zip	Code
	 					i i	•	FL	1 1	ļ
11. Pursuant	to the provision	ons of Sections 607.	.0502 and 607.15	ous, Fiorida s	statutes, t	ne above-n	amed corp	poration submits this statement for the purpose of	changing it	ts registered
D1110C 01 1		and or pour as nice o	itale of Florida. St	och change	was author	orized by th	e corporati	tion's board of directors. I hereby accept the appo	untment as	registered
	m familiar witt	h, and accept the o	bligations of, Sec	tion 607.050	was autho 35, Florida	orized by the Statutes.	e corporati	poration submits this statement for the purpose of fon's board of directors. I hereby accept the appoint	untment as	registered
agent. I a		n, and accept the o						ion's board of directors. hereby accept the appoint of the constant of the c	entment as	registered
SIGNATURE	Signature, typed o	or printed name of registere		cable.	(NOTE: Reg	gistered Agent si			DIRECTOR	1S IN 12
SIGNATURE 12. IITLE	Signature, typed o	or printed name of registere OFFICERS	id agent and little if appli	cable.	(NOTE: Reg	pistored Agent si 13.		red when reinstating) DATE.		
SIGNATURE 12. IITLE NAME	Signature, typed of D PEREZ, (or printed name of registers OFFICERS	id agent and little if appli	cable.	(NOTE: Reg	pistered Agent si 13. 1.1 TiTLE 1.2 NAME	ignature require	red when reinstating) DATE.	DIRECTOR	1S IN 12
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14. I hereby 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 haste 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.