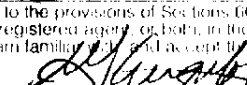
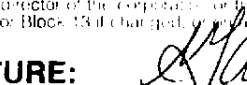


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000085214 1. Corporation Name ANGEL ANGULO, P.A.			
Principal Place of Business 12860 SW 43 DRIVE # 245B MIAMI, FLORIDA 33175		Mailing Address SAME	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 12860 SW 43 DRIVE Suite, Apt. #, etc. 22 245B City & State 23 MIAMI, FL Zip 24 33175 Country 25 MIAMI-DADE		2a. Mailing Address 26 SAME AS ✓ Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30	
9. Name and Address of Current Registered Agent AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES, FL 33134		10. Name and Address of New Registered Agent 81 Name ANGEL ANGULO 82 Street Address (P.O. Box Number is Not Acceptable) 12860 SW 43 DRIVE, #245B 83 84 City MIAMI FL 85 Zip Code 33175	
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 provisions of Section 607.0505, Florida Statutes. SIGNATURE:  PRESIDENT DATE: 4/20/98			
12. OFFICERS AND DIRECTORS TITLE: PRESIDENT, SEC. & TREASURER NAME: ANGEL ANGULO STREET ADDRESS: 12860 SW 43 DRIVE # 245B CITY-ST-ZIP: MIAMI, FL 33175 [DELETE] [DELETE] [DELETE] [DELETE] [DELETE] [DELETE]		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	
14. I 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 supplement to 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 registered agent employed 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 in the statement with an address.			
SIGNATURE:  PRESIDENT		4/20/98 (305) 599-2121	

CR2E034 (10/97)