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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000087437 (4)

SUMMER WIND, CORP.

Principal Place of Business 8690 SW CORAL WAY STE 208

2. Principal Place of Business

SIGNATURE:

MIAMI FL 33185

Malling Address

8890 SW CORAL WAY STE 208

MIAMI FL 33165

2a. Mailing Address

SIGNATURE REQUIRED

FILED Jul 10 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

Sular

10/09/1997

2. Principal Place of Business			2a. Mailing Address					4. FEI Number	Applied For	
21 21 21 21 21 21 21 21 21 21 21 21 21 2			26					65-0794103	Not Applicable	
Suite, Apl. #, etc.			Suite, Apt. #, etc.						\$8.75 Additional	
22			27					5. Certificate of Status Desired	Fee Required	
City & Stale			City & State					6. Election Campaign Financing	\$5.00 May Be	
23			28					Trust Fund Contribution '	Added to Fees	
Zip	Country		Zip	Zip Co.		ountry		8. This corporation owes or has paid the current year intengible		
24 25			29	30			Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered A	gent	
NAVEIRO, FERNANDO						81	Name			
8890 SW CORAL WAY STE 208						82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33165						or other residence (1.5. Box Humber to Not Acceptable)				
						83				
						04 04				
						84	City	FI	85 Zip Code	
11. Pursuant to the provisions of sections 607.0502 and 607.1508. Florida Statutes, the abo							Shove-named corporation submits this statement for the number of changing the sectioned			
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 obligations of, section 607.0505, Florida Statutes.										
The state of the s										
SIGNATURE	Blanches Senet	or printed name of registered agent a	ari dita il anniani	46 740	Tr. Basista	44-				
12.		OFFICERS AND			13.	0 140	ent signatura requ	APPLITIONS/QUANCES TO OFFICERS AND	BISESTEES IN IS	
TITLE	P	OT TOLITO ATO	DIRECTOR	DELETE	1.1 TITU			ADDITIONS/CHANGES TO OFFICERS AND	7	
NAME		NAVEIRO, FERNANDO						L	Change Addition	
-	0000 811 80515 505					1.2 NAME				
STREET ADDRESS	MTAMT TT 33165					1.3 STREET ADDRESS		•		
CTY-ST-ZIP TITLE		TB 33103			1.4 CITY		ZIP			
	S	TODOD	DELETE			2.1 TITLE			Change Addition	
NAME	LEON,	JORGE			2.2 NAM	2.2 NAME				
STREET ADDRESS	7542 SW 143rd AVE MIAMI FL 33183				2.3 STRE	2.3 STREET ADORESS				
CITY-BIT-ZIP	MILMIT	LT 22102			2.4 CITY		!IP			
TITUE				L DELETE	3.1 TITLE	Ē			Change Addition	
NAME					3.2 NAM	E				
BTREET ADDRESS					3.3 STRE	ETA	DORESS			
CITY-8T-ZIP					3.4 CITY	ST-Z	IP .			
TITLE				DELETE	4.1 TITLE				Change Addition	
NAME					4.2 NAME	E		_	4 5	
STREET ADDRESS					4.3 STRE	ET AI	DORESS		シュ	
CITY-ST-ZIP					4.4 CITY-	ST-Z	IP		7.10	
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WIE					5.2 NAME	2		8000025856	UB	
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ATY-81-ZIP					5.4 CITY-			***150.00	į	
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IAME	11	/			6.2 NAME			L	Change Addition	
TREET ADDRESS	()	, <i>\</i>			6.3 STREE		ODRESS		,	
HY-8T-ZIP	_ \ _\	<i>J</i> · <i>J</i> ·							İ	
14. I hereby ce	rtify that the	mation supplied with thi	s filing does	not qualify for the	exemption	א הכ	tated in secti	on 119.07(3)(I). Florida Statutes I further codify the	at the information	
an officer or director of the torretion or the receiver or trustee emonwered to execute the same legal effect as if made under oath; that I am										
14. I hereby certify that the high mation 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 arrival report of applemental 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 transfer or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Blook 12 or Blook 13 if of the control of the 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 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 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 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 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 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 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 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 true and accurate and that my signature shall have the same legal effect as if made under oath accurate and that my signature shall have the same legal effect as if made under oath accurate and that my signature shall have the same legal effect as if made under oath accurate shall have the same legal effect as if made under oath accurate shall have the same legal effect as if made under oath accura										