

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

FILED
Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000088586 (7)**

1. Corporation Name
JUNIOR HOLDINGS, INC.



Principal Place of Business 2300 CORAL WAY MIAMI FL 33145	Mailing Address 2300 CORAL WAY MIAMI FL 33145
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7330 N.W. 12th Street Suite, Apt. #, etc. 22 Suite 201 City & State 23 MIAMI FLORIDA Zip 24 33126 Country 25 US		2a. Mailing Address 26 7330 N.W. 12th Street Suite, Apt. #, etc. 27 Suite 201 City & State 28 MIAMI FLORIDA Zip 29 33126 Country 30 US		3. Date Incorporated or Qualified 10/14/1997
		4. FEI Number 65-0792713		Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees
		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent DADE CORPORATE SERVICES, INC. 2300 CORAL WAY MIAMI FL 33145		10. Name and Address of New Registered Agent 81 Name Dade Corporate Services, Inc. 82 Street Address (P.O. Box Number is Not Acceptable) 2300 Coral Way, Suite 103 83 84 City Miami FL 85 Zip Code 33145	
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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.

SIGNATURE *Laura Charur* DATE **4/15/98**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D LOPEZ-CANTERA, AMADA	1.2 NAME	D P Guillermo Zedan
STREET ADDRESS	2300 CORAL WAY	1.3 STREET ADDRESS	same
CITY-ST-ZIP	MIAMI FL 33145	1.4 CITY-ST-ZIP	same
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	D VP Elias A. Charur, Jr.
STREET ADDRESS		2.3 STREET ADDRESS	same
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	DS Laura Charur
STREET ADDRESS		3.3 STREET ADDRESS	same
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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 a 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.

SIGNATURE *Laura Charur* DATE **4-9-98 305-591-9792**

CR2E034 (10/97)