## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550,00

**PROFIT CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

<b>DOCUMENT #</b>	P98000096306
1 Corneration Name	1 0000000000

FLORIDA COMMUNITY CENTERS CORP.

Mailing Address		! !D\$!!D\$!   D   B      B      D\$!!    B      B
v		
	IVE., STE 3000	
MIAMI FL 33131		DO NOT INDITE IN
		DO NOT WRITE IN
		3. Date Incorporated or Qualifed 11/16/1998
2a. Mailing Address		4. FEI Number
26		65-0900596
27		5. Certificate of Status Desired [1]
City & State		6. Election Campaign Financing 7.
28		Trust Fund Contribution
[ Z <sub>i</sub> p	Country	8. This corporation owes the current y
29	30	Personal Property Tax
rrent Registered Agent		10. Name and Address of New Regis
T CODDODATION	81 Name	
I CURPURATION	82 Storet	Address (P.O. Box Number is Not Acceptable)
	MiAMI FL 33131  2a. Mailing Address 26  Suite, Apt #, etc 27  City & State 28  Zip 29	C/O 701 BRICKELL AVE. STE 3000 MIAMI FL 33131   2a. Mailing Address 26 Suite, Apt #, etc. 27 City & State 28 Zip Country 29 Trent Registered Agent T CORPORATION  81 Name

701 BRICKELL AVE., STE 3000 MIAM! FL 33131

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93 1FR 27 PH 12: 22	
SECRETARY OF STATE TALL ATTACKS FF. FLORID	٨



DO NOT WRITE IN THIS SPACE					
3. Date Incorporated or Qualifed 11/16/1998					
4. FETNumber		Applied For Not Applica			
65-0900596		Not Applica			
5. Certificate of Status Desired	[ ]	\$8.75 Additional Fee Required			
6, Election Campaign Financing Trust Fund Contribution	[]	\$5.00 May Be Added to Fees			
This corporation owes the cum     Personal Property Tax	ent year l	ntangible XIYes [ ]No			
10. Name and Address of New F	tegistere	d Agent			

83 84 City

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

agont ran	in terminer with, and accept the obligations of, section out .0303, Fight	ida Stattiles		
SIGNATURE	Signature typed or profied name of registered agent and bliefd applicable (1901)	Resident 1 April San Shire	encommunication of the DATE	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	[   DELETE	111945	DP	[ ] Change [ ] Addition
NAME		1.2 NAME	Allen de Olazarra	
STREET ADDRESS		13 STREET ADORESS		00
City-ST-ZiP		14 CHY-ST-Ziki	Miami, FL 33131	00
TITLE	[  DELETE	2 1 THLE	DST	[  Change
NAME		2.2 NAME	Rodolfo Prio Touzet	
STREET ADDRESS		23 STREET ADDRESS	701 Brickell Ave., Ste. 30	00
CITY-S1-ZIP		2.4 C/TY-51-7e1	Miami, FL 33131	00
TITLE	[   DELETE	3 1 1 H L F	Pilami, FD 33131	[   Change   [   Addition
NAME		32 NAM		
STREET ADDRESS		3.3 STREET ADORESS		
CITY-ST-ZIP		3.4 CITY-\$1-2iP		
TITLE	[   DELETE	4 1 Tillet		[   Change
NAME		4 2 NAME	ALL PLANTS ALL PARTS ALL P	and and and and
\$TREET ADDRESS		43 \$1kEf LADOre 59	\$ 90000285	
CITY-ST-ZIP		4.4 CHY+51-2i6	**************************************	-01083013
TITLE	[   DELETE	5.1 TITLE	###165U.U	O (Paragal SQ (DQ) on
NAME		5.7 NAME		
STREET ADDRESS		53 STREET ADDRESS	5	
CITY-ST-ZIP		54 OTY-ST-261		
TITLE	LIDELETE	6 1 TITLE		[   Change   [   Addition
NAME		6.2 NAME		
STOCET ADDOCCO		6.3 STREET ADDRESS	<u>,                                    </u>	<u> </u>

14. Thereby 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 path, that I am advortice 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 eyen attachment with an address, with all other like empowered.

**SIGNATURE:** 

NOR DIRECTOR