FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

APPROVED

DOCUMENT # **S00177** **(3)**

1. Corporate Name
BARJA MANAGEMENT, INC.

Principal Place of Business
10300 SUNSET DR
SUITE 135
MIAMI FL 33173

Mailing Address
10300 SUNSET DR
SUITE 135
MIAMI FL 33173

(DO NOT WRITE IN THIS SPACE)

3. Date Incorporated or Qualified: **09/17/1990**
3a. Date of Last Report: **06/27/1994**

2. This Address Is Effective
21
Suite Apt # or Bldg
22
City & State
23
24 25

2a. Mailing Address
26
Suite Apt # or Bldg
27
City & State
28
29 30

4. FEI Number: **65-0266293**
Applied For
Not Applicable

5. Certificate of Status Desired [ ] **$8.75** Additional Fee Required

6. Elections Campaign Financing Trust Fund Contribution [ ] **$5.00** May Be Added to Fees

5. Does corporation qualify for exemption under Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
AGUDO, MARCELO M.
1647 SW 27 AVE
MIAMI FL 33145

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. The undersigned, being the President of the corporation named above, hereby resigns as registered agent of the corporation and accepts the appointment as registered agent. I am familiar with and accept the obligations of a registered agent under Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	DS
Name	BARJA, JOSE M.
Street Address	10300 SUNSET DR #135
City, St, Zip	MIAMI FL
Title	DP
Name	FAGET-BARJA, VIVIAN
Street Address	1647 SW 27 AVE
City, St, Zip	MIAMI FL

13. ADDITIONAL OFFICERS AND DIRECTORS

Title	[ ] Change [ ] Addition
Name	
Street Address	
City, St, Zip	
Title	[ ] Change [ ] Addition
Name	
Street Address	
City, St, Zip	
Title	[ ] Change [ ] Addition
Name	
Street Address	
City, St, Zip	
Title	[ ] Change [ ] Addition
Name	
Street Address	
City, St, Zip	
Title	[ ] Change [ ] Addition
Name	
Street Address	
City, St, Zip	
Title	[ ] Change [ ] Addition
Name	
Street Address	
City, St, Zip	

14. I hereby certify that the information supplied with this report is accurate and does not qualify for the exemption stated in Section 607.0193, Florida Statutes. I further certify that the corporation is subject to the annual report or supplemental annual report requirements of Chapter 607, Florida Statutes, 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 trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that the name appears in Block 12 or Block 13 or changed or added by attachment with an address.

SIGNATURE: Vivian Faget-Barja
SIGNATURE AND TYPED OR PRINTED NAME OF HOLDING OFFICER OR DIRECTOR
VIVIAN FAGET-BARJA

4/26/95 Date

(305) 854-2643 Daytime Phone #

0107680 CP