FILE	NOW:	<b>FILING</b>	FEE	<b>AFTER</b>	MAY	1	IS	\$225.00
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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sangra B. Morthagi

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT	Ħ
<ol> <li>Corporation Name</li> </ol>	

S06349

(2)

IDIA	Ô	ANION	0000
IKIN.	X.	ANGEL	CORP.

Principal Place of Business

Mailing Address



20129 SW 123RD DRIVE MIAMI FL 33177			20129 SW 123RD DRIVE MIAMI FL 33177					
						<ol> <li>Date Incorporated or Qualified</li> <li>10/11/1990</li> </ol>	3a. Date of Last 6	
Principa⊩Pla ]	ace of Business	2a. Malin	g Address			4. f El Number		Applied For
<del></del>	W	26				65-0221865		Not Applicable
Suite, Apt. #		27]	Apt #, etc.			5. Certificate of Status Desired	LJ Fee	5 Additional Required
City & State	!	<b></b>	State			6. Election Campaign Financing		<b>)0</b> May Be
Zιp	Country	28   				Trust Fund Contribution	Adde	ed to Fees
<b>-</b> p	25	29		Country 30		8. This corporation has liability for i	intang ble tax under s No	199.032,
	9. Name and Address		Agent	1301		10. Name and Address of New R		
				81	Name		- gont	
VASQUE	F7 IDIS				D	/D.C. D		
	SW 123RD DR.			82	Street Add	ress (P.O. Box Number is Not Acceptab	iO)	
MIAMI F				83				
MINNI F	L 931//							
				84	City		FL 85 Z	ip Code
	Signal in Hypedion protectinal of the		(*4*)	DE Rajiser Aje	il Soja al Jertesa e e		EJATE	
LE		CERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI		
ME :	PST		DELETE	1 1 71716			☐ Change	Addition
1	VASQUEZ, IRIS	.n. =		1.2 NAME				
					ADDRESS			
1	29129 SW 123RD D	HIVE			·			
Y - \$1 - ZIP	29129 SW 123RD D MIAMI FL 33177		LJ DELETE	14 CHT S	·		Change	- Add too
Y-ST-ZIP .E			DELETE	1.4 CHTY S 2.1 TITLE	·		☐ Change	Addition
Y-SI-ZIP E ME			DELETE	14 CFTY S 2 1 TITLE 22 NAME	I - ZHP		Change	Add:tion
Y-SI-ZIP LE ME EET ADDRESS			DELETE	1.4 CFTY S 2.1 TITUS 2.2 NAME 2.3 STREET	I - ZiP ADDRESS		☐ Change	Addetion
Y-ST-ZIP LE ME MET ADDRESS Y-ST-ZIP			DELETE	14 CFTY S 2 1 TITLE 22 NAME	I - ZiP ADDRESS		☐ Change	
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Y - ST - ZIP  E  ARE  EET ADDRESS Y - ST - ZIP  E  EET ADDRESS (- ST - ZIP  E  EET ADDRESS EET ADDRESS			DELETE	14 CHY S 2 1 THEF 22 NAME 23 STREET 24 CHY S 3 1 THEE 32 NAME 33 STREE 34 CHY S 4 1 THEF 42 NAME 43 STREET	ADDRESS 1-7P ADDRESS F-7P ADDRESS		Change	Addition
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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 of clirector of the comparation 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 11 behanded or on an attrachment with an address

SIGNATURE:

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytine Phone #