SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.

AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT #

Principal Place of Business

5637 SW 1ST ST

# S

S12536

(6)

Mailing Address

5637 SW 1ST ST

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LYLNGLAD	ころ ししいろいれい	JUHUN, UU	RPURATIUN

	MIAMI FL 33134		i	MIAMI FL 33134						
								3. Date Incorporated or Qualified 11/14/1990		ate of Last Report 5 <b>/01/1995</b>
	. Principal Place of Bus 1	siness	2a.	Mailing Address				4. FEI Number		Applied for
21	L		26					65-0264606		Not Applicable
Suite, Apt #, etc 22		27	Suite, Apt #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23	L		28	City & State	·		···	Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees
24	Zip	Country 25	29	Z(μ)	30 Cc	untry		This corporation has liability for in Florida Statutes	itangib'e	tax under s 199 032 No
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
DIAZ, RENE I. 5637 SW 1ST ST MIAMI FL 33134			81 82 83	Name Street Addi	dress (P.O. Box Number is Not Acceptable)					
						84	City		<b>6</b> 1	85 Zip Code

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 Storida Such change was authorized by the corporation's poard of directors. Thereby accept the appointment as registered agent. I am Jamilian with, an accept the obligations of, Section 607,0505, Florida Statutes.

agent ran	pramilial with, and accept the obligations of, St	ection 607.0505, Fior	nda Statutes		
SIGNATURE	Stycular: Typ o or place Transporting decitographs addition to	ada waa ahaa ahaa	Fig. 6 forest Agent signature	Francisco Property Laboratory	
12.	OFFICERS AND DIRECTO	·	13.	ADDITIONS/CHANGES TO OFFICE	FRS AND DIRECTORS IN 12
TITLE	D	DELETE	1 1 TITLE		Change Add-tion
NAME	DIAZ, RENE I.		1.2 NAME	President	
STREET ADDRESS	4231 NW 4 ST		1.3 STREET ADORESS	Diaz, Rene I.	
CITY - ST - ZIP	MIAMI FL		1.4 CITY - ST - ZIP	5637 SW 1st St	
TITLE		DELETE	21 TIFLE	- Miami, Fl 33134	Change Addition
NAME			2.2 NAME		
STREET ADORESS			2.3 S18EET ADDRESS		
CITY - ST - ZIP			2 4 CHY - ST - ZIP		
TIT <sub>k</sub> E		DELETE	311006		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-SI-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	41 DILE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZiP			4.4 Cify - ST- ZIP		
7:TLE		DELETE	5 t TiTLE		Change Addition
NAME			5.2 NAME		
STREET ADORESS			5 3 STREET ADDRESS		
CITY - ST - ZIP			54 CITY - ST- 25P		
TITLE		DELETE	61 THE		Change Addition
NAME		<del></del> -	6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 + CUY ST 7/P		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119 07(3)(k). Florida Statutes 1 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 curector of the composition or the occurrence or trusted empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 changed, or on an attachment with an address

SIGNATURE: (X)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/96 305-267-7825

CR2E034 (3/96)