

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

FILED

Apr 10 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 # **S36388** (4)  
1. Corporation Name  
**BOLERO HOLDINGS, INC**

Principal Place of Business  
**42 NW 27TH AVE #400  
MIAMI FL 33125**

Mailing Address  
**42 NW 27TH AVE #400  
MIAMI FL 33125**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>3900 N.W. 79th AVE</b> Suite, Apt. #, etc. 22 <b>216</b> City & State 23 <b>MIAMI FL</b> Zip 24 <b>33166</b>		2a. Mailing Address 26 <b>3900 N.W. 79th AVE</b> Suite, Apt. #, etc. 27 <b>216</b> City & State 28 <b>MIAMI FL</b> Zip 29 <b>33166</b>		3. Date Incorporated or Qualified <b>03/08/1991</b>	
		4. FEI Number <b>65-0304664</b>		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent <b>BARRERA, ROBERT E. 42 N.W. 27TH AVENUE SUITE 400 MIAMI FL 33125</b>		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) <b>3900 N.W. 79th AVE SUITE 216</b> 83 84 City <b>MIAMI</b> FL 85 Zip Code <b>33166</b>	
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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

Signature, typed or printed name of registered agent and fee if applicable

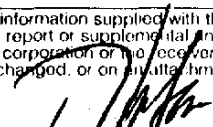
(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<b>D/P</b>
NAME	<b>BARRERA, ROBERT E.</b>	1.2 NAME	
STREET ADDRESS	<b>42 NW 27TH AVE # 400</b>	1.3 STREET ADDRESS	<b>3900 N.W. 79th AVE SUITE 216</b>
CITY-ST-ZIP	<b>MIAMI FL</b>	1.4 CITY-ST-ZIP	<b>MIAMI FL 33166</b>
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 my qualification with an address.

SIGNATURE:



3-30-98

(305) 513-9983

CR2E034 (10/97)