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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$48246

(0)

LUYMAR ENTERPRISES, INC.

**FILED** Apr 28 1997 8:00am Secretary of State



Principal Place of Business  9357 ONTAINBLEAU B:LYD. D110 APT D110 MIAMI FL 33186		Mailing Address 8357 ONTAINBLEAU B:LVD. D110 APT D110 MIAMI FL 33186			Date Incorporated or Qualified			
					04/26/1991	05/01/	1996	
·	Place of Business	2a. Mailing Address			4. FEI Number			pplied For
21		26			65-0255741			ot Applicable
Suite, Ap	it #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ <b>\$</b>	_	Additional equired
22 City & St	outo.	City & State						· <u>i</u>
· ·	ale				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
23 Zip	Country		Count	· · · · · · · · · · · · · · · · · · ·	8. This corporation has liability for			
24	25	29	30	,		Yes N		ISB.U32,
	9, Name and Address of Current		1001		10. Name and Address of New Re			<del></del>
M	ALDONADO, LUCIO		8	Name				
	57 FOUNTAINBLEAU BLVD		-	N China N Anda	(D.O. D. Alexandre & May Assessed			
	PT D110		82 Street Ad		dress (P.O. Box Number is Not Acceptab	He)		
	AMI FL 33172		8:	3				
1411	TOTAL TE VVIII		<u> </u>					<u> </u>
i			64	City		FL  8	5 Zip	Code
<b>12.</b> TITLE	Suprature typed or panied name of registered agen OFFICERS AND DP		13.		ired when reinstating) ADDITIONS/CHANGES TO OFFI		RECTO Change	l' 12 Addition
NAME	MALDONADO, LUCIO	<del></del>	1.2 NAME				•	
STREET ADDRESS			1.3 STREE	T ADDRESS				
CHY-ST-ZIP	MIAMI FL		1.4 C(TY-	ST-ZIP				
TITLE	DST	☐ DELETE	2.1 TITLE				Change	Addition
NAME	MALDONADO, MARTA		2.2 NAME	.				
STHEFT ACIORES	\		2.3 STREE	T ADDRESS				
CI1Y - S1 - ZIP	MIAMI FL		2. 4 CITY	-ST-ZIP				
THLE		☐ DELETE	3.1 TITLE			L	Change	Addition
NAME			3.2 NAME					
STREET ADDRESS	5		3.3 STREI	T ADDRESS				
CITY - ST - 71F			3 4. CITY					F1 6 5 66
TITLE		☐ DELETE	4.1 TITLE			LJ	Change	Addition
NAME			4. 2 NAM					
STREET ADDRESS	5			TADDRESS				
CITY - ST - ZIP		Dritte	4.4 CITY	ST-ZIP			Chases	8.84.6:
TITLE		L_J DELETE	5.1 TITLE				Change	L Addition
NAME			5.2 NAME	i				
STREET ADORES	S		1	T ADDRESS				
CHY-ST-7/P		DELETE	5.4 CiTY-				Change	Addition
TITLE		f"" nerese	6.1 TITLE	į.			ภเหเนิด	□ Addition
NAMè			6.2 NAME					
STREET ADDRESS	5			T ADDRESS				
CHY+ST-70°			6.4 CITY	ST-ZIP				

14. I do 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 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 on an attackment with an address.

SIGNATURE:

01/20/97

(305) 227-9278