FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUN 1. Corporation ((-)				888 1 414 818 11 8	I ĐẠI ĐƯỢC ĐƯỢC ĐƯỢC ĐƯỢC ĐƯỢC ĐƯỢC ĐƯỢC ĐƯỢC
Principal Place of Business Mailing Address							IEN BIBIT BIBIT BIBIT
13061 N. KENDALL DRIVE MIAMI FL 33186		13061 N. KENDALL DRIVE MIAMI FL 33186					
					 Date Incorporated or Qualified 04/29/1991 		e of Last Report 05/18/1995
2. Principal Plac	ce of Business	2a, Mailing Address			4. FEI Number		Applied For
21	-4-	26			65-0258427		Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing		\$5.00 May Be
3		28			Trust Fund Contribution		Added to Fees
Zφ	Country	Zip	Country		8. This corporation has liability for		ax under s 199.032,
24	9. Name and Address of Cu	rent Registered Agent	30		Florida Statutes Y	es No Registered	Agent
	3. 1101110 0110 1100 01 00		81	Name			- Inguit
9-60-46	HIDDE TARRO		82	Street Addr	TETOR RIESSER ress (P.O. Box Number is Not Accept	rable)	
-13061-N	I-KENDALL-DAIVE			1306	OIN ICENDALL OF	٤	
_MAMIJ	1. 33186		83				
/			84	City	20		85 Zip Code
11 Durou ot to	the priving the Section 607.	YAO and 607 1509 Etorida Statu	too the above r		DAMI	FL	
or registere	d agent, the gravin the State of I	Florida Such change was authori	tes, the accident zed by the corp	pration's boar	ration submits this statement for the properties of directors. I hereby accept the appropriate the properties of the pro	pointment as	anging its registered office s registered agent. I am
familiar with	W. T.	Section 697.0505, Florida Statute		est estimate	A		61
SIGNATURE		VICTON NET	Olf Britisherej Võeu	t signature regulee	dikawa renstatngi	OATE	4-96
12.	OFFICERS	AND DIRECTORS	13.		ADDITIONS/CHANGES TO C		
TITLE	D	☐ DELETE	1. 1 THLE			,	Change
NAME	-RIESSOR, VICTOR	-	1.2 NAME	/C	IESSER, VICTOR		
STREET ADDRESS CHTY+ST+ZIP	13061 N. KENDALL DRIV	E	1.3 STREET	ADURESS /	3001 N. KENSTI	Lak	
TITLE	MIAMI FL 33186	DELETE	1.4 C(TY - S 2 1 T(TLE	1-719	3001 N. KENSAZ MIAMI, 71 37	186	Change Addition
NAME	EGO-AGUIRRE, MARIO	•	2.2 NAME			•	
STREET ADDRESS	13061 N. KENDALL DRIV	/E →	2.3 STREET	ADDRESS			
CITY - ST - ZIP	-MIAMI FL 33186		24007-5	I - ZIP			
TITLE		☐ DELETE	3 1 THE	1		,	Change Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET				
CITY - S1 - ZIP		☐ DELFIE	3 4 CHY - S 4 1 THILE	1 - ZIF			Change Addition
NAME			4.2 NAME			'	
STREET ADDRESS			4.3 \$18661	ADDRESS			•
CITY - ST - ZIP			4.4 C-TY - S	1 - ZIP			
TITLE		☐ DELETE	5 1 THILE				Change Addition
NAME			5.2 NAME				
STREET ADORESS			5 3 STREET				
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY - S 6 * TITLE	1 - Z:P		- 	☐ Change ☐ Addition
NAME	/ \	_ better	62 NAME				
STREET ADDRESS	/ 1		63 STREET	ADDRESS			
CITY-ST-ZIP	/		8.4 CITY - S	i i			
14. I do hereby	certify that the information surp	lied with this filing is voluntarily fur	nished and doe	s not qualify f	for the exemption stated in Section 1	19.07(3)(k), Fi	orida Statutes. I further
oath; that I appears in	am an officer or director of the o Block 12 or Block 13 if the order	orporation or the receiver or trust, or on an attachment with an add	ee empowered : dress.	to execute thi	ate and that my signature shall have t is report as required by Chapter 607,	Florida Statu	tes, and that my name

SIGNATURE

SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR