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PROFIT
CORPORATION
ANNUAL REPORT
- 1997



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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S48717 (0)
1. Corporation Name
FRANCIS X. MORA INC.



Principal Place of Business PO BOX 164921 MIAMI FL 33116
Mailing Address PO BOX 164921 MIAMI FL 33116

2. Principal Place of Business 21 S1 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 S1 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date incorporated or qualified 04/20/1997	3a. Date of last record 04/20/1995
				4. FEIN 65-200158	Applied For Not Applicable
				5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
				6. Election Campaign Financing From: First Contribution ☐ \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 189.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent MORA, FRANCIS X. 12515 SW 111TH AVE MIAMI FL 33176		10. Name and Address of Now Registered Agent 81 Name MORA, FRANCIS X 82 Street Address, P.O. Box Number or Post Office Box 11118 SW 148 PLACE 83 City MIAMI FL 33176	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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 Francis X. Mora FRANCIS X. MORA 4-26-96

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
TITLE	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	MORA, FRANCIS X	1.2 NAME	MORA, FRANCIS X
STREET ADDRESS	12515 S.W. 111 AVE.	1.3 STREET ADDRESS	11118 SW 148 PLACE
CITY - ST - ZIP	MIAMI FL 33176	1.4 CITY - ST - ZIP	MIAMI FL 33196
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 189.032, 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 register or trustee empowered to execute this report as required by Chapter 107, Florida Statutes; and that my name appears in Block 12 or Block 13 if checked, qualified, or both with an address.

SIGNATURE: Francis X. Mora FRANCIS X. MORA 4-29-97 305-387-7258