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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S51841

(2)

COPELASA, INC.

Principal Place of Business Mailing Address						[ 10071048 101 01101 7189] 1971 [1001 1101	ANDIN BEHEFF BEREIK E		##0]  { <b>#</b> 0]
7330 N.W. 12TH SUITE 201 MIAMI FL 33120	7330 N.W. 12TH STREET SUITE 201 MIAMI FL 33126-1937	201							
		·				3. Date incorporated or Qualified 05/13/1991	3a. Date o 05/01/		eport
2. Principal Place of Business 2a. Mailing Address						4. FEI Number		Ap	plied For
21		26		<del> </del>		65-0261891		<del></del>	t Applicable
Suite Apt. # etc. Suite, Apt. #, etc. 27						5. Certificate of Status Desired	_ \$	8.75 / Fee Re	Additional equired
City & State	9	City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 Added 1	May Be to Fees
Ζφ <b>24</b>	Country 25	Ζφ <b>29</b>	Count	ry		8. This corporation has liability for the Florida Statutes	ntangible tax		. 199.032,
	<ol><li>Name and Address of Curren</li></ol>					10. Name and Address of New Re	gistered Age	nt	
ANG	ulo, frank		8	1 Name	BEI	LLO, NANCY			
7330 N.W. 12TH STREET SUITE 201			8	<sup>2</sup> 7330		ss (P.O. Box Number is Not Acceptab	le)	· · · · · · · · · · · · · · · · · · ·	
MIAMI FL 33126			8	3 SUIT	E 20	)1			
			8	4 City MIAM	I		FL 8	5 Zip (	Code 26-1937
11, Pursuant i	to the provisions of Sections 607 050;	Pland 607,1508 Florida Statute of Florida Such change was au	s, the abo	ve-named	corpo	ration submits this statement for the p in's board of directors. I hereby accep	urpose of che	inging it	s registered
agent La	m familiar with, and accept the obliga	tions of, Section 607 0505, Flor	ida Statut	es	JOIGHO	The board of directors. Thereby accep	A THE EXPONIT	HOUL GIS	iogistered
SIGNATURE	Many Be	llo.			······		1-23	-9	<b>7</b>
12,	Signatus type Communication Co	Pase interapptoable (NOTE: DDIRECTORS	Registered A	gent signature	required	when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE	ECTOR	C INI 12
TITLE	PO / NOCHO ANK	DELETE	1.1 7171.5	:	PD	ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	ANGULO, FRANK		1.2 NAM			LLO, NANCY	h1	O ALTIGO	
STREET ADDRESS	7330 N.W. 12TH ST #201			ET ADDRESS		30 N.W. 12TH ST #201			
CITY - ST - 7P	MIAMI FL		1.4 CITY			AMI, FL			
TITLE	VO	X DELETE	2 1 TITLE	***************************************	VD		<u> </u>	Change	Addition
NAME	PINNAVAIA, FABIO		2.2 NAM			NDOZA, MILAGRO			
STREET ADDRESS	7330 N.W. 12TH ST #201			ET ADDRESS		30 N.W. 12TH ST #201			
CICY+\$1-7(P	MIAMI FL			r-ST-ZIP		MI.FL			
TITLE	TD	X DELETE	3.1 TITLE		TD	M. A. J. A. A	X	Change	Addition
NAME	QUANT, VILMA V		MAN S E	E		DAS, AMPARO	•		
STREET ADDRESS	7330 N.W. 12TH ST #201		3.3 STRE	ET ADDRESS		30 N.W. 12TH ST #201			
CITY - ST - ZIP	MIAMI FL		3.4 CITY	(-ST-ZIP		MI.FL			
THEE	SD	<b>△</b> DELETE	4.1 TITLE		SD		X.	Change	Addition
NAME	Molina, Emma		4. 2 NAM	4E		PEZ, MARIA H.			
STREET ADDRESS	7330 N.W. 12TH ST #201		4.3 STRE	ET ADDRESS		30 N.W. 12TH ST #201			
City - S1 - ZiP	MIAMI FL		4.4 CITY	-ST-ZIP		AMI.FL			
1014		☐ DEL€1E	5.1 TITLE					Change	Addition
HAME			5 2 NAM	E					
STREET ADORESS			5.3 STRE	ET ADORESS					
CDM-SI-78			5 4 CITY						
TITLE		☐ DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAM	E				-	
STREET ADDRESS		,		ET ADDRESS					

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 13 of changed, or on an attachment with an address.

SIGNATURE:

1-23-94 (305) 5919792

**FILED** 

Jan 29 1997 8:00am

Secretary of State