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PROFIT CORPORATION **ANNUAL REPORT**

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 06 1997 8:00am Secretary of State

Principal Place of Business 145A W 22ND ST 106 HALEAH FL 33011 Major (5) Major (6) M						
US	5011	08		3. Date Incorporated or Qualified 05/20/1991	3a. Date of Last I 08/14/1996	
— ·	lace of Business	2a. Mailing Address		4. FEI Number		pplied For
Suite, Apt.	#. etc.	26 Suite, Apt. #, etc.		65-0264138	- ¢0.75	lot Applicable Additional
22	n i oto,	27]		5. Certificate of Status Desired		Required
City & State	9	City & State		Election Campaign Financing Trust Fund Contribution		May Be
Zip 24	Country 25	Z(p	Cpuntry 30	8. This corporation has liability for in Florida Statutes	ntangible tax under	s. 199.032,
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Reg	sistered Agent	
CASTILLO, PEDRO 1. 9908 HAMOCKS BLVD. #108			81 Name	dress (P.O. Box Number is Not Acceptabl		
				uress (F.O. Box Number is Not Acceptable		
MIA	MI FL 33196		83			
			84 City		FL 85 Zip	Code
office or re	egistered agent, or both, in the Sta	ate of Florida. Such change was	ومستنب والمستطاف بالمارا المستشرب بأفروها			
SIGNATURE	Signature, typed or printed name of registered		lorida Statutes. IE. Regisfered Agent signature requ		DATE	
SIGNATURE	Signature, typed or printed name of registered of PFICERS A	agent and tills if applicable. (NC	TE. Regisfored Agent signature requ		DATE	RS IN 12
SIGNATURE:	Signature, typed or printed name of registered OFFICERS A P CASTILLO, PEDRO 1. 15212 SW 148TH CT.	agent and title if applicabile. (NC	FIE. Registered Agent signature requ	uired whon reinstating)	DATE ERS AND DIRECTOR	RS IN 12
SIGNATURE 12, TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CASTILLO, PEDRO I. 15212 SW 148TH CT. MIAMI FL	egent and tills if applicable. (NC AND DIRECTORS DELETE	1E Regisfered Agent signature requirements 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 City-S1-ZiP	uired whon reinstating)	DATE ERS AND DIRECTOI Change	RS IN 12
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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 it made under eath; that I am an officer or director of the corporation or the required or truster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chalged, or on a attachment with an address.

GNATURE:

(305) 813 - 4429