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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Wortham,

Secretary of State
Division of Corporations

FILED Mar 10 1998 8:00am Secretary of State

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	UMENT # \$7107 IN INVESTORS, INC.	75 (3)			50 816U 818U 818U 818U 818U 818U
Principal Pla	ing of Business	Mailing Address			DIY EKOLI BIBLI BIBLI DIBKI 1061
NCYPRESS AMOCO, NCY 850 NE 62ND STREET 850		%CYPRESS AMOCO			
		850 NE 62ND STREET FT. LAUDERDALE FL 33334		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
L		[26]		65-0279992	Not Applicable
Suite, Ap	t #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Sta	ale	City & State		6. Election Campaign Financing	\$5.00 May Be
L <u>.</u>		28		Trust Fund Contribution	Added to Fees
Zip	Country	Z _I p	Country	8. This corporation owes or has paid the c	
	25 Add-22 of Suc	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
	 Name and Address of Curr IMON, JUAN 	rent Hegistered Agent	81 Name	10. Name and Address of New Registered	а Адепі
·	T. LAUDERDALE FL 33334		83 84 City	F	85 Zip Code
office or	nt to the provisions of Sections 607.0 registered agent, or both, in the Stage familiar with and accord the ob-	J502 and 607.1508, Florida State of Florida Such change w	atules, the above-named co as authorized by the corpor Florida Statutes		
IGNATURE	Signature typed or poptert came of regelered	aspecta of filled applicable (NOTE Registered Agent signature rec	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap-	of changing its registered phointment as registered .
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-	PVST SIMON, JUAN 7619 MIRABELLA OR.	agest and fillest applicable (NOTE Registered Agent signature rec 13. 1.5 TITLE	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap-	of changing its registered pointment as registered
IGNATURE 1. ILE IME TREET ADDRESS TY-ST-ZIP	Signature typed or period came of regelated OFFICERS / PVST SIMON, JUAN	Opera of bile of orgalism to AND CHER CTORS	NOTE Registered Agent signiture rec 13. 1 \$ TITLE 12 NAME 1 \$ STREET ADDRESS 1.4 CITY-\$1-2IP	orporation submits this statement for the purpose ration's board of directors. I hereby accept the ap-	of changing its registered pointment as registered ND DIRECTORS IN 12 Change Addition
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14. I 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 eath; that I am an officer or director of the corporation or the receiver or frusted 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 attachment with an address.

SIGNATURE:

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2/9/98

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