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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation REY L	MENT # Name .IQUOR STO	S81 · RE, CORP.	161	(9)						
Principal Place	of Business		Maili	ng Address			{	DI IVOT DIDIT DIDIT DICETE AT		
1200 SW 8TH ST. MIAMI FL 33135 US			1 k	5410 NW 77TH CT. MAMI FL 33016 JS						
							3. Date Incorporated or Qualified 09/18/1991	3a, Date of Last F 04/25/1		
2. Principal Pla	ice of Business		2a. № 26	failing Address			4. FEI Number <b>65-0302838</b>		Applied For	
Suite, Apt. #	, etc.	·		Suite, Apt. #. etc.	7.5 1.002 2		** ************************************	\$8.7	Not Applicable  5 Additional	
27			27				5. Certificate of Status Desired		Fee Required	
City & State			<b>28</b>	ity & State			6. Election Campaign Financing Trust Fund Contribution	1 1	May Be	
Zip	<del>                                     </del>	Country		ip	Country	<i>t</i>	8. This corporation has liability for it		199.032,	
4	25	Address of Cur	29	vad Agant	30		Florida Statutes X Yes	□ No		
	y, warne and	AUDIESS OF CUI	i en registel	reu Agent	81	Name	10. Name and Address of New R	egistered Agent		
VIII AM	II JORGE E				Ľ.					
VILLAMIL, JORGE F. 1200 S.W. 8TH ST. MIAMI FL 33135					82	Street Add	lress (P.O. Box Number is Not Acceptabl	le)		
					84	City		larl 3	n Codo	
						1			p Code	
familiar with	n, and accept the	obligations of, S	Section 607.05	nange was aumonze 05, Florida Statutes.	o by the corp.	oration's boa	ration submits this statement for the purp ard of directors. Thereby accept the appo	ATRITION LAS REGISTERES	rageni. ram	
tamiliar with	n, and accept the	obligations of, S ad nan c of registered a	section 607.05	Ub, Florida Statutes.	Te Registeren Ager		sor whom recordatings	DA <sup>†</sup> E		
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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 trusted 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 an an attachment with an address.

SIGNATURE:

SIGNATURE SIGNATURE AND THE DIRECTOR DIRECTOR DIRECTOR DIRECTOR

Daylone Phone F