## 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 # \$81579

(2)

PUERTA DEL SOL, INC.

Principal Place of Business

Mailing Address

## FILED Apr 21 1997 8:00am Secretary of State



1501 N.W. 100TH WAY PLANTATION FL 33322		1501 N.W. 100TH WAY PLANTATION FL 33322-6521					
					3. Date Incorporated or Qualified 09/19/1991	3a. Date of Last 04/29/1996	
2. Principal P	lace of Business	2a. Mailing Address		10-10	4. FEI Number	<b>├</b> ── <del> </del>	Applied For
Suite, Apt.	AMI AG ABOUL	26 <i>SAM</i> Suite, Apt. #, etc.	A5	ABOUR	65-0280349	<del></del>	Vot Applicable
22		27			5. Certificate of Status Desired		Additional Required
City & State 1, (1/2/2) City & State 28					Election Campaign Financing     Trust Fund Contribution		May Be d to Fees
Zip 24	Country 25	Zip 29	30 Cou	ntry	8. This corporation has liability for integrable tax under s. 199.032, Florida Statutes 199.032 Yes		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
	Z, MARVIN			81 Name			
1501 N.W. 100TH WAY				82 Street Addr	ess (P.O. Box Number is Not Acceptab	ile)	
PLANTATION FL 33322				83			
			İ	63			
			Ī	84 City		FL 85 71	o Code
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statut	les, the ab	ove-named corp	oration submits this statement for the p		its registered
office of fi agent, I a	egistered agent, or both, in the State om familiar with, and accept the obligation ${f m}$	of Florida. Such change was a tions of, Section 607.0505, Fi	authorizec orida Stati	i by the corporal utes.	oration submits this statement for the p ion's board of directors. I hereby accep	of the appointment a	is registered
SIGNATURE	<del></del>						
12.	Signature, typed or printed name of registered agen OFFICERS AND		f : flegistered	Agent signature requir	ed when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTO	IRS IN 12
TITLE	P	DELFTE	1.1 10	LE	ABATTA AGENT IN CLEAN TO CONTINUE	Change	(
NAME	KATZ, MARVIN	1.2 N/		ME			
STREET ADDRESS	1501 NW 100 WAY		1.3 ST	REE1 ADDRESS			
CITY-ST-ZIP	PLANTATION FL		1.4 CII	Y-\$1-ZIP			}
TITLE	ST	☐ DELETE	2.1 ไป	LE		☐ Change	Addition C
NAME .	KATZ, AGNES		2.2 NA	ME			ľ
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TITLE	NEUMANN, JOSZEF	□ outit	3.1 111	i		∐ Change	Addition
NAME STREET ADDRESS	1849 S. OCEAN DRIVE		3.2 NA	ME REE1 AODRESS	•		
CITY-ST-ZIP	HALLANDALE FL			TY-S1-ZIP			
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NAME	NEUMANN, MARGIT	_ ·	4. 2 N/	NME			
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CITY-ST-ZIP	HALLANDALE FL		4.4 DR	Y-ST-7IP			
TITLE		DELETE	5.1 TIT	LE		Change	Addition
NAME			5.2 NA	ME	:		
STREET ADDRESS			5.3 ST	REE1 ADDRESS			
CITY-ST-ZIP		Donne		IY-ST-ZIP		Π Δε	
TITLE		☐ DELETE	6.1 7/1	i		Change	Addition
NAME			6.2 NA	ſ			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP	ay cortifu that the information aunalised	with this filles does not quali		Y-SI-ZIP	s in Spaling 110.07(2)(i) Elector Stotuto	a. I durther east to the	ot the

4. 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 12 or Block 13 if changed, or on an attachment with ap address.

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