FILE	NOW: FIL	ING FEE AF	TER MAY 1 IS	\$ \$22	<b>5</b> .	00				
PROFIT CORPORATION			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham			TATE	1-2			
ANNUAL REPORT  1996			Secretary of State DIVISION OF CORPORATIONS			)NS				
		S92414	(9)			<del></del>				
	VIEW INVESTA	IENT. INC.								
******	71611 11116011									
Principal Place	of Business		Mailing Address							
2655 LEJEUNI			2655 LEJEUNE ROAD							
STE 908 CORAL GABLES FL 33134			STE 908 CORAL GABLES FL 33134							
US			US				3. Date Incorporated or Qualified 11/06/1991	3a. Date of Last		
2. Principal Pla	ce of Business	1:	2a. Mailing Address				4. FEI Number	05/01/1	Applied For	
21		2	····1				65-0351226		Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1	75 Additional e Required	
City & State			City & State			.,	6. Election Campaign Financing		.00 May Be	
Zip	Cou	ntry 2	<b>8</b>   Ζφ	Cou	ntn/		1 Trust Fund Contribution  8. This corporation has liability for		ded to Fees	
24	25	2	9	30			Florida Statutes Yes	Ľ <b>I</b> No	\$ 199,002,	
	9. Name and Ad	dress of Current Re	gistered Agent		81	Name	10. Name and Address of New F	tegistered Agent		
MALE MICHAEL II							iress (P.O. Box Number is Not Acceptal	ole)		
	RY STREET	83								
SUITE 30 MIAMI FI										
					84	City	FL 85 Zip Code			
11. Pursuant to or registere	o the provisions of Sed agent, or both, in	ections 607,0502 and the State of Florida. S	607.1508, Florida Statute uch change was authorize	s, the abo	ove-r	amed corpo oration's boa	oration submits this statement for the pu and of directors. Thereby accept the app	rpose of changing it ointment as register	s registered office red agent. I am	
	h, and accept the ob	ligations of, Section 6	07.0505, Florida Statutes.							
	Signature, typed or printed n	rise of registered agent and tit			Agen	l signature requin	ed when reinstating)	DATE	700010140	
12. TITLE	PD	·			13. 1 1 TiTLE		ADDITIONS/CHANGES TO OFF	Chang		
NAME	ESPELETA, ALFONSO		121		1.2 NAME					
STREET ADDRESS	CODAL CARLES EL		¥		1.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	CORAL GABLES FL VAS		and a contract of the contract		1.4 CITY-ST-ZIP 2 1 TITLE		AND THE COMMENSATION OF THE PROPERTY OF THE PR	Chang	e 🔲 Addition	
NAME	SERINA, QUIRICO		2.2		AME					
STREET ADDRESS 2655 LE JEUNE RD., #908 CORAL GABLES FL			2.3 STREET ADORESS			- 1				
CITY-ST-7IP TITLE	VST VST	O FL	2.4 CHY-S  DELETE 3.1 TIFLE			T-ZIP		Chang	ge 🔲 Addition	
NAME	SALVOCH, MANUEL		3.2		AME					
STREET ADDRESS	CODAL CARLEC EL		3.3 STREET ADDRE							
CITY-ST-ZIP TITLE	V V				iTY - S :TLE	1 - 21P		Chang	ge [] Addition	
NAME	GUERRERO, JOSE LUIS		4.2 M		AME					
STREET ADDRESS	CODAL CADIFO EL		4.3 STREET A			8000018	40328			
CITY - S1 - ZIP TITLE	VSAT		4.41 DELETE • 5.1		*	1-719	-05/28/9601023002 ***1575.00 Change Addition		ge 🔲 Addition	
NAME	VALLES, ROD		_	52 N	AME		***1313.UU	•		
STREE1 ADDRESS	CODAL CARLES EL					ADDRESS				
CITY-ST-ZIP TITLE		FT) DELETE			(T-7)P	TO THE PROPERTY OF THE PROPERT	Chang	ge Anddition		
NAME	Whitaker, O	felia ne Rd, ste	.908	6.2 N				أسر	2 x/ 4/2	
STREET ADDRESS	2055 Letel	neka, sic	2/1			ADDRESS		>(	Col 10	
	y certify that the info		this filing is voluntarily furni	shed and	doe		for the exemption stated in Section 119			
certify that oath; that	the information indic tam an officer or dire	ated on this annual re ector of the corporatio	port or supplemental annu	ial report empowe	is tru	ue and accur	rate and that my signature shall have the his report as required by Chapter 607, F	e same legal effect a	is if made under	

Charles on Printed on Printed Name of Signing Officer or Direction 513/96 Take 442-0426 Dayling Phone

SIGNATURE:

Waterriew Investment, Inc. FEI # 65-0351226

592414

Hidulgo-Monroy, Luis 2455 LeJeune Rd., Ste.908 Coral Gables, FL 33134

VAS AT D'Addition

Inderbitzin, Ernesto 2665 LeJevne Rd., Ste.908 Coral Gables, PL 33134

Dr Addition

VAS

marin, Ernesto 2655 Leverne Rd., Ste. 908 Coral Gables, FL 33134