FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

(0)

1. Corporation Name

Principa! Place o			lailing Address 2150 CORAL WAY			-					
3C Miami Fl 33145 US			3C Miami FL 33145 US		3. Date Incorporated or Qualified 11/08/1991 3a. Date of Last Report 04/28/1995						
2. Principal Plac	ce of Business	h1	, Mailing Address					4. FEI Number 65-0297318		├ ─ -	Applied For Not Applicable
Suite, Apt. #,	, etc.	26	Suite, Apt. #, etc.			<u>.</u>	5. Certificate of Status Desired		\$8.75	Additional Required	
City & State			City & State				6. Election Campaign Financing		• -	May Be	
Zip	Country	28	Zip	Cc	ountry			Trust Fund Contribution 8. This corporation has liability for	intangible		1 to Fees 199.032,
24	25		30					Florida Statutes Yes No 10. Name and Address of New Registered Agent			
	9. Name and Address of Curre	nt Regi	stered Agent		81	Τī	Name	10. Name and Address of New	Togratere	u Agent	
DI GIGLIO, MARTIN S.					82			ess (P.O. Box Number is Not Accepta	ble)		
2150 CORAL WAY, SUITE 3C MIAMI FL 33145							···				
MIAMIF	L 33145				84	-	Dity		F	85 Zig	o Code
SIGNATURE	Signature, typed or printed name of registered age OF FICERS At	nt and fiffe	it applicable (f		red Agn			ation submits this statement for the put of directors. I hereby accept the application of the put of directors of the put of directors. I hereby accept the application of the put of directors of the put of directors of directors of directors of directors. I have been accepted as a put of directors of di	DATE	ND DIRECTO	DRS IN 12
TITLE	DPS		DELETE	ı	1 TITLE					Change	Addition
NAME STREET ADDRESS	DI GIGLIO, MARTIN S 2150 CORAL WAY - SUITE	3C		•	NAME STREE		ORESS				
CITY-ST-ZIP	MIAMI FL				CITY-		ZIP			Change	☐ Addition
TITLE	VPT		DELETE		1 TITLE		1			Change	Addition
NAME STREET ADDRESS	DI GIGLIO, MARIA D. 2150 CORAL WAY - SUITE	3C		23		TAE	DDRESS				
CITY-S1-7P	MIAMI FL.		DELETE		1 TITLE		ZIP			Change	Addition
TITLE	AS DI GIGLIO, MARIA D.		E) beter		2 NAME						_
NAME STREET ADDRESS	2150 CORAL WAY - SUITE	3C		3:	3 S1RE	EI A	DORESS				
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NAME					2 NAME		nnacce				
STREET ADDRESS				6	.3 51HE	E i A	DDRESS				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this 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 gianged, or on an attachment with an address.

SIGNATURE:

LEIGHT MARTH DI CIGLO
PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23.96

305-854-8528

FILED

Secretary of State

May 01 1996 8:00 am