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



Sandra B. Mortham

FILED Jan 15 1998 8:00am Secretary of State

	PROFIT RPORATION UAL REPORT 1998	Sand Se	DEPARTMENT OF STATE Ira B. Mortham Icretary of State I OF CORPORATIONS	Jan 15 199 Secretary	98 8:00an y of State
DOCU 1. Corporation SANZ,	311 PLD 110	462 (5)			
Principal Plac	ce of Business	Mailing Address			1401F 0104F 0101 0101 0404F 1004
531 MICHIGA MIAMI BEACH		531 MICHIGAN AVE. MIAMI BEACH FL 33			
WITHIN DETTO	716 90100	MINIM DENGIT TE O	,,,,,	DO NOT WRITE IN TE	IIS SFACE.
				3. Date Incorporated or Qualified 11/20/1991	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0301690	Not Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc	> .	5. Certificate of Status Dosired	\$8.75 Additional Fee Required
22 City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zlp	Country	Zip	Country	8. This corporation owes or has paid the	
24	25 D. Name and Address of	29 f Current Registered Agent	[30]	Personal Property Tax due June 30. 10. Name and Address of New Register.	Yes No
A.O	NCHEZ, ERNESTO	Carron Nogistorea Agent	81 Name	IV. Marile and Address of New Asylater	ed Agent
	0 W. 50 ST.		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	ALEAH FL 33012		PX Street Add	dress (F.O. Box Number is Not Acceptable)	
			83		
			63		
			84 City		85 Zip Code
11 Durament	to the previolence of Regions	007 N.02 and 007 H 09 Florida 6	84 City	Provides submits this determined for the pursuant	·L
11. Pursuant office or	to the provisions of Sections registered agent, or both, in the form the second the seco	607,0502 and 607,1508, Florida S he State of Florida Such change no bilitative of Section 607,055	84 City Statutes, the above-named corwas authorized by the corpora	rporation submits this statement for the purposation's board of directors. I hereby accept the a	·L
agent. I a	to the provisions of Sections registered agent, or both, in the am familiar with, and accept the	607.05.02 and 607.1508, Florida S he State of Florida. Such change ne obligations of, Section 607.050	84 City Statutes, the above-named corwas authorized by the corpora	rporation submits this statement for the purposition's board of directors. Thereby accept the a	·L
agent. I a	am familiar with, and accept the	ne obligations of, Section 607.050	84 City Statutes, the above-named corwas authorized by the corpora 5, Florida Statutes (NO1E Registered Agent signature requ	ured when re-estating) (১১)।	I c of changing its registered appointment as registered
agent. I a SIGNATURE 12.	am familiar with, and accopt the Signature, typed or printed name of rep	ne obligations of, Section 607.050 inscred agent and tile d applicable ERS AND DIRI CTORS	84 City Statutes, the above-named corwas authorized by the corpora 5, Florida Statutes (NOTE Registered Agent signature required)		e of changing its registered appointment as registered i.
agent. I a SIGNATURE	am familiar with, and accept the Signature, typed or printed nan-o of rep OFFICE	ne obligations of, Section 607.050	84 City Statutes, the above-named corwas authorized by the corpora 5, Florida Statutes (NOTE Begistered Agent signature required 13.	ured when re-estating) (১১)।	e of changing its registered appointment as registered in the control of the con
agent. I a SIGNATURE 12.	Signature, typed or printed name of rep OFFICE P SANCHEZ, ERNESTO	ne obligations of, Section 607.050 inscred agent and tile d applicable ERS AND DIRI CTORS	84 City Statutes, the above-named corwas authorized by the corpora 5, Florida Statutes (NOTE Registered Agent signature required)	ured when re-estating) (১১)।	e of changing its registered appointment as registered as negations.
SIGNATURE 12. TITLE NAME	am familiar with, and accept the Signature, typed or printed nan-o of rep OFFICE	ne obligations of, Section 607.050 inscred agent and tile d applicable ERS AND DIRI CTORS	B4 City Statutes, the above-named corwas authorized by the corpora 5, Florida Statutes (NOTE Registered Agent signature required 13.	ured when re-estating) (১১)।	e of changing its registered appointment as registered i.
SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed nerve of rep OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL	ne obligations of, Section 607.05C	B4 City Statutes, the above-named corwas authorized by the corporate, Florida Statutes (NOTE Begistered Agent signature requestion of the si	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed nerve of reg OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO	ne obligations of, Section 607.05C	84 City Statutes, the above-named corwas authorized by the corpora 5, Florida Statutes (NOTE Registered Agent signature requestry) 13. E 1.1 TILLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City-S1-ZIP E 2.1 TILLE 2.2 NAME	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	ne obligations of, Section 607.05C	84 City Statutes, the above-named corwas authorized by the corpora 5, Florida Statutes (NOTE Registered Agent signature requested 13. 13. 1.1 THE 12 NAME 1.3 STREET ADDRESS 1.4 City-S1-ZiP 21 THLE 22 NAME 2.3 STREET ADDRESS	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition
AGONT I E SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed nerve of reg OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO	ne obligations of, Section 607.050	84 City Statutes, the above-named corwas authorized by the corpora 5, Florida Statutes (NOTE Registered Agent signature requested 13. 13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-S1-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY-S1-ZIP	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	ne obligations of, Section 607.05C	Registered Agent signature required to the corporation of the corporat	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition
AGONT. I E SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	ne obligations of, Section 607.050	Registered Agent signature request. (NOTE Registered Agent signature request.) 13. 1.3 THEF 12 NAME 1.3 STREET ADDRESS 1.4 CHY-S1-ZIP 2.2 NAME 2.3 STREET ADDRESS 2.4 CHY-S1-ZIP 3.1 THE 3.2 NAME	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	ne obligations of, Section 607.050	Registered Agent signature required to the corporation of the corporat	ured when re-estating) (১১)।	e of changing its registered appointment as registered it AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	ne obligations of, Section 607.050	Registered Agent signature required to the corporation of the corporat	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	DELETI	Registered Agent signature required to the corporation of the corporat	ured when re-estating) (১১)।	c of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	DELETI	Restautes. The above-harned corwas authorized by the corporate, Florida Statutes (NOTE Begistered Agent signature required in the signature require	ured when re-estating) (১১)।	c of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	DELETE	Restautes. The above-named corwas authorized by the corporate by the corpo	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	DELETI	B4 City Statutes, the above-named corwas authorized by the corpora 5, Florida Statutes (NOTE Registered Agent signature required in the signature	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	DELETE	B4 City Statutes, the above-named corwas authorized by the corpora 5, Florida Statutes (NOTE Registered Agent signature requ 13. E 1.1 THE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3.1 THE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP 4.1 THE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-S1-ZIP 5.1 THE 5.2 NAME	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	DELETE	B4 City Statutes, the above-hamed corwas authorized by the corpora 5, Florida Statutes (NOTE Registered Agent signature requ 13. E 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 5.4 CITY-S1-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	DELETE	B4 City Statutes, the above-named corwas authorized by the corporate of t	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	DELETE DELETE	B4 City Statutes, the above-named corwas authorized by the corporate of t	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of region of the OFFICE P SANCHEZ, ERNESTO 180 W. 50 ST. HIALEAH FL S SANCHEZ, CONSUELO 180 W. 50 ST	DELETE DELETE	B4 City Statutes, the above-hamed corwas authorized by the corpora 5, Florida Statutes (NOTE Registered Agent signature requ 13. E 1.1 THE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.1 THE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3.1 THE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP 4.1 THE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-S1-ZIP 5.1 THE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-S1-ZIP 5.1 THE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-S1-ZIP 5.1 THE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-S1-ZIP 5.1 THE 5.2 NAME	ured when re-estating) (১১)।	e of changing its registered appointment as registered AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition

CITY-ST-ZIP 6.4 CITY - ST - ZIP 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 it 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 13 if changed, or on an attachment with an address