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

1. Corporation	MENT # S98455 PORTS, INC.	5 (6)			
Principal Place of Business 4800 PINE TREE DRIVE		Mailing Address 4800 PINE TREE DRIVE		רוספר נאפוים ונקונם וומוגה נופרים ואפגים אומים ונוס נמנאה וספרנק וחיפה נמנטר פנו פומאספרו א	
MIAMI BEACH FL 33140		MIAMI BEACH FL 33140-3135		1	
				3. Date Incorporated or Qualified 3a. 1 04	Date of Last Report
	Place of Business	2a. Mailing Address		4. FEI Number 65-0305802	Applied For
Suite: Apt. #. etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Country	Trust Fund Contribution	Added to Fees
Z(p 24	25	29	30	8. This corporation has liability for intangible Florida Statutes Yes	
	9. Name and Address of Curre		1901	10. Name and Address of New Registered	
BLAI	NCO, JUDITH		81 Name		
4600 PINE TREE DRIVE MIAMI BEACH FL 33140			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
			100		
			83		
			84 City	FI	85 Zip Code
11. Pursuant office or nagent I a	to the provisions of Sections 607.05 registered agent, or both, in the Statem familiar with, and accept the oblig	02 and 607.1508, Florida Statu e of Florida. Such change was gations of, Section 607.0505, F	ites, the above-named corp authorized by the corpora lorida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	
SIGNATURE		C.U.	TE Registered Agent signature requi	red when reinstating) DATE	
12.	Signar are typod or printed name of registored as OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
THLE	D	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	BLANCO, JOSE M.		1.2 NAME		
STREET ADDRESS	4600 PINE TREE DRIVE		1.3 STREET ADDRESS		
C-TY - ST - ZIP	MIAMI BEACH FL D	T hr eye	1.4 CITY-ST-ZIP		Change Addition
TITLE	BLANCO, JUDITH	[] DELETE	2.1 TITLE		Change Addition
NAME STREET ADDRESS	4600 PINE TREE DRIVE		2.2 NAME 2.3 STREET ADDRESS		•
CITY-ST-ZIP	MIAMI BEACH FL		2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME	:	
STREE1 ADDRESS			3.3 STREET ADDRESS		
CITY - ST- ZIP			3.4. CITY-ST-ZIP		
THILF		DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 THTLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-\$1-ZIP	by cartify that the information consti	ad with this filing door not ave	6.4 CITY-ST-ZIP	d in Section 119.07(3)(i), Florida Statutes. I furth	er cortify that the
informatio Lam an o	on indicated on this annual report or	supplemental annual report is or the receiver or trustee ampo	true and accurate and tha wered to execute this repo	of it section 119.07(5), Florida Statutes. From it my signature shall have the same legal effect int as required by Chapter 607, Florida Statutes;	as if made under oath; that

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FILED

May 07 1997 8:00am

Secretary of State

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