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FILED
May 02 1997 8:00am
Secretary of State



PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V14927 (0)
1. Corporation Name
L.P. INVESTMENTS & ENTERPRISES, INC.



Principal Place of Business
555 N.W. 72ND AVENUE
SUITE 509
MIAMI FL 33128

Mailing Address
4100 WEST FLAGLER
A-S
MIAMI FL 33134-1640
US

3. Date Incorporated or Qualified: 02/17/1992
3a. Date of Last Report: 04/29/1996
4. FEI Number: 65-0347741
Applied For: Not Applicable
5. Certificate of Status Desired: ~~Star~~ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 Zip Country

2a. Mailing Address
25 Suite, Apt. #, etc.
26 City & State
27 Zip Country
28 Zip Country
29 Zip Country
30 Zip Country

9. Name and Address of Current Registered Agent
ZAMORA, ENRIQUE
901 PONCE DE LEON BLVD.
SUITE 502
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	VPTD	<input type="checkbox"/> DELETE
NAME	VAZQUEZ, JOSE	
STREET ADDRESS	555 N.W. 72ND AVE #509	
CITY - ST - ZIP	MIAMI FL	
TITLE	PC	<input type="checkbox"/> DELETE
NAME	PRIETO, GERMAN L	
STREET ADDRESS	4100 WEST FLAGLER ST, SUITE A-1	
CITY - ST - ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT/CHAIRMAN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	PRIETO, ANGELA S.	
1.3 STREET ADDRESS	4100 WEST FLAGLER STREET SUITE A-2	
1.4 CITY - ST - ZIP	MIAMI FL 33134	
2.1 TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	PRIETO, GERMAN L.	
2.3 STREET ADDRESS	4100 WEST FLAGLER ST. SUITE A-2	
2.4 CITY - ST - ZIP	MIAMI FL 33134	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. 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 as an attachment with an address.

SIGNATURE: *Jose Vazquez* JOSE VAZQUEZ 4/18/97 (305)-461-1414
DATE: 4/18/97 DAYTIME PHONE: (305)-461-1414

CR2E034 (9/96)