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

DOCUMENT # V30865

(2)

ALMITA,					
Principal Place 1002 NE 39TH OAKLAND PAR US	ST	Mailing Address 1002 NE 39TH ST OAKLAND PARK FL 33334 US	4-2950		
				3. Date Incorporated or Qualified 04/23/1992	3a. Date of Last Report 04/10/1996
2. Principal P	lace of Business	28. Mailing Address		4. FEI Number	Applied For
21		26		65-0349192	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Country	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032, Yes No
24	25 9. Name and Address of Curre	29 ent Registered Agent	30	Florida Statutes 10. Name and Address of New Re	
DAL	MIEREZ FRANCISCA	Etti riogiotoroa Agoitt	81 Name	IV. Italio allo Address of from the	Autorop (April
	2 NE 39TH ST				
	KLAND PARK FL 33334		82 Street Addi	ress (P.O. Box Number is Not Acceptat	ole)
UA.	NDARD FAIR LE 60004		83		
			84 City		FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent or both, in the Sta	502 and 607.1508, Florida Statut te of Florida, Such change was	tes, the above-named corp	poration submits this statement for the patients board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered
agent la	im familiar with, and accept the obt-	gations of, Section 607.0505, FI	orida Statutes.		
	im familiar with, and accept the obt-	gations of, Section 607.0505, Ft	orida Statutes.	· · · · · · · · · · · · · · · · · · ·	
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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 on an attachment with an address.

FILED

Jan 14 1997 8:00am

Secretary of State