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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Principal frace of Fluories 2a, Mailing Address 2a, Mailing Address 4. Fil Number 65-0333410 No.	reaco	iy or st	Scoretar	ORATIONS	DIVISION OF CORPO		1997	
Super Place of Elements Malari R. 20175 Ma			((1)	V33930	FINATIO	1. Corporation
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Suite April # of the Suite Suite Suite Suite Suite Spanse S	Applied For				Mailing Address	├~ -¬	ace of Business	
City & State Zep Country Zep Country Zep Country Zep Sep Name and Address of Current Registered Agent MINGUEZ, JULIO C. 11. Pursuant to the provisions of Sociolons 607 0502 and 607 1508, Floridal Statutes, the above heared corporation submits this statement for the purpose of changing efficiency registered agent, or both, in the State of Floridal Statutes, the above heared corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as authorized by the corporation's board of directors. I hereby accept the appointment as a province of	Not Applicable	60 7E .	······································		Suite Apt. #, etc.		# etc	
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MINGUEZ, JULIO C. 12 NAME 1.0 Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 12330 S.W. 46 ST.	s. 199.032,			Country	`		} ₋₁ ′	Zip
MINGUEZ, JULIO C. 12330 S.W. 48 ST. MIAMI FL 33175 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 City FL 85 City FL 85 City FL 86 City FL 87 City City FL 88 City City Ci			. To Total O'Estate					<u>!4]</u>
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B3 B4 City		e)	ss (P.O. Box Number is Not Acceptable)	82 Street Addres	•		30 S.W. 48 ST.	1233
TI. Pursuant to the provisions of Soctions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as agreement and the purpose of change was authorized by the corporation's board of directors. Thereby accept the appointment as agreement and the purpose of change was authorized by the corporation's board of directors. Thereby accept the appointment as agreement and the purpose of change an				83				******
The previous to the provisions of Soctions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change was authorized by the corporation's board of directors. Thereby accept the appointment as agreed 1 am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature Translation of registered agent and sec d appreciation. (NOTE Registered Agent algoritum required when renotating). DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTO THE MINGUEZ, JULIO C. 12 NAME SIRELT ADDRESS 13 STREET ADDRESS MIAMI FL. 14 CITY-S1-2P DELETE 2.7 TITLE 1.7 TITLE Change SHRET ADDRESS CITY-S1-2P DELETE 3.1 TITLE 1.2 CITY-S1-2P DELETE 3.1 TITLE Change CHY-S1-2P DELETE 3.1 TITLE CHANGE SHRET ADDRESS CHY-S1-2P DELETE 3.1 TITLE CHANGE ALCHY-S1-2P DELETE 3.1 TITLE CHANGE CHY-S1-2P DELETE 3.1 TITLE CHANGE CHANGE CHY-S1-2P DELETE 3.1 TITLE CHANGE CHANGE CHY-S1-2P DELETE 3.1 TITLE CHANGE CHY-S1-2P	p Code	- 85 Zip C		84 City				
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64 CITY-ST-2IP 14. It 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 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 upon the same up	at the	I further contifu that	in Section 119 07/3V/II Elevido Statutos			Marmation Jupa ad with this	on cart by that the inter-	

Lam an officer or director of the corporation appears in Block 12 or Block 13 if changed ustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name

SIGNATURE:

SIGNATURE AND TY

FILED

May 02 1997 8:00am

Secretary of State