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PROFIT CORPORATION ANNUAL REPORT

1996



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

| DOCL | IMENT # |
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| 1 to 1 1 m | | Mailing Address 7320 W. 2ND LANE HIALEAH FL 33014 | | | | | | |
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| THAT LEAVE TO THE | VVIII | FINCENT TE SOUT | | | 3. Date Incorporated or Quali 06/01/1992 | | te of Last 01/25/ | |
| . Principal Plac | ce of Business | 2a. Mailing Address | | | 4. FEI Number | | 1,720, | Applied For |
| Cuito Ant 4 | | 26 | | | 65-0340989 | | | Not Applicable |
| Suite, Apt. # | , ecc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desire | ed 🔲 | • | 5 Additional Required |
| City & State | | City & State | | | Election Campaign Financi | ino | | 00 May Be |
| | | 28 | | | Trust Fund Contribution | | | ed to Fees |
| Zip | Country | Zip | | Country | 8. This corporation has liabilit | | ax under | s 199.032, |
| | 25 9. Name and Address of Curre | 29 ant Registered Agent | 30 | | | Yes □No | | |
| | g. Name and Address of Curr | eur uadistateo wäeur | | 81 Name | 10. Name and Address of N | lew Registered | Agent | |
| CUERVO | D, MANUEL A. | | | | | | | |
| | . 2ND LANE | | | 82 Street Add | ress (P.O. Box Number is Not Acc | eptable) | | |
| | H FL 33014 | | | 83 | | | | ···· |
| | | | | 84 City | | | 1221 - | Y- 0 |
| | | | | 10-1 Oily | | | 85 2 | ip Code |
| familiar with | PSD | onda. Such change was authorication 607.0505, Florida Statute | IZEC by the SS. NOTE: Registe | e corporation's boa | ird of directors. I hereby accept the | DATE OFFICERS ANI | langing its s registere | d agent. I am ORS IN 12 |
| familiar with | o agent, or both, in the State of Fid ,, and accept the obligations of, Se gnature, tyred or printed name of registered ag- | orida. Such change was author ction 607.0505, Florida Statute ant and title if applicable (N ND DIRECTORS | IZEC by the Pass. NOTE: Register 13 1. 1.2 | e corporation's boa ared Agent signature require 3. | rd of directors. I hereby accept the | perpose of che appointment as DATE OFFICERS ANI | anging its s registere D DIRECT | d agent. I am ORS IN 12 |
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 2/3/96 (305) 822-703C