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

Principal Place 12180 S.W. 1; MIAMI FL 331	IIC OVERSEAS ENTERPRIS De of Business 26 STREET	Mailing Address 12180 S.W. 128 STREET MIAMI FL 33186-5230			
US		US		3. Date Incorporated or Qualified	
2. Principa! f	Place of Business	2a. Mailing Address		4. FEI Number Applied	For
21		26		85-0350531 Not Appl	
Suite, Apt	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	
City & Sta	te	City & State	······································	6. Election Campaign Financing \$5.00 May 8	Ве
23 Z _i p	Country	28 Zip	Country	8. This corporation has liability for intangible tax under s. 199.0	
24	25 9. Name and Address of Curre		10	Florida Statutes X Yes No 10. Name and Address of New Registered Agent	
	LA TORRIENTE, COSME J PA	ur uedisteren Wann	81 Name	tu, Name and Address of New Neglistered Agent	
	PONCE DE LEON BLVD			Address (P.O. Box Number is Not Acceptable)	
SU	ITE 1040			Addition (1.0. Dox (140/100) to 110/ Addeptions)	
CO	RAL GABLES FL 33134		83		
			84 City	FL 85 Zip Code	
11. Pursuani	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	the above-named	corporation submits this statement for the purpose of changing its regist poration's board of directors. I hereby accept the appointment as regist	stered
agent. I age	Signature, typed or printed name of registered a		Registered Agent signature		
TITLE	I PD	DELETE	1.1 TITLE		Addition
NAME	RODRIGUEZ, GUSTAVO		1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS	10300 SW 72 Street #270)
CHY-S1-ZIP	MIAMI FL 33188		1.4 CITY-ST-ZIP	Mismi, Fl. 33173	
THILE		L' DELETE	2.1 TITLE	Change D	Addition
NAME STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS		
CITY - S1 - ZIP		•	2.4 City-ST-Zip		
TITLE		☐ DELETE	3.1 TITLE	Change	Addition
NAME			32 NAME		
STREET ADDRESS	1		3.3 STREET ADDRESS		
CHY-ST ZIP		-	3.4. CITY - ST - ZIP		
TIFLE		☐ DELETE	4.1 Title	Change 2	Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-S1-7IP	·	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Change	Addition
NAME			5.2 NAME	· · · · · · · · · · · · · · · · · · ·	
STREET ADDRESS			5.3 STREET ADDRESS		
CHTY-S1-ZIP			5.4 CiTY-ST-ZIP		:
TITLE		DELETE	6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Addition
NAME			6.2 NAME	*	
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-SI-ZIP	1		6.4 CITY-ST-ZIP		

SIGNATURE:

I am an officer or appears in Block

14. I do hereby certify that the information indicated up this annual

supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the problemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the full of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name a stack ment with an address.

4/34/97 (305) 270 - 2362 Dayloro Proce 1

FILED

May 08 1997 8:00am

Secretary of State