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PROFIT CORPORATION ANNUAL REPORT



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

1996

V58958

(2)

Principal Place of Business Mailing Address 5589 N.W. 72 AVE MIAMI FL 33166 3. Date Incorporated or Qualified 08/20/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 55-0355334 Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State 28. Country Applied For Country Suite, Apt. #, etc. Country Applied For Status Desired Fee Required 6. Election Campaign Financing Financing Address Trust Fund Contribution Added to Fees Added to Fees Trust Fund Contribution Added to Fees Added to Fees	DOCUM 1. Corporation I	MENT # V589	58 (2)							
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Suite Act 1, etc. Suite Act 1, etc. Suite Act 1, etc. Suite Act 1, etc. Suite Act 2, etc. Suit		ce of Business		Mailing Address					├	
City & State State		etc.					\$9.75 Additional			
28	22		<u> </u>	<u> </u>			Certificate of Status Des	ired 🔲	+	
28	City & State		 1	 			, ,			
10, Name and Address of New Registered Agent					/					199.032,
DIBOS, ALVARO 12814 S.W. 68 LANE	24									
DIBOS, ALVARO 12814 S.W. 68 LANE MIAMI FL 33183 B4 Crty FL 65 Zp Code 11. Pursuant to the previsions of Sections 607 0562 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida Stude, change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Sections 607 0565, Florida Studes. SIGNATURE 12.		9, Name and Address of Curi	ent Hegistered Agent	81	Name		IO. Name and Address of	New Hegister	ed Agent	
12814 S.W. 68 LANE MIAMI FL 33183 B3 B4 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607:0502 and 607:1508. Florids Statutes. B5 City SFL 85 Zip Code 11. Pursuant to the provisions of Sections 607:0502 and 607:1508. Florids Statutes. B6 City SFL 85 Zip Code 11. Pursuant to the provisions of Sections 607:0502 and 607:1508. Florids Statutes. B6 City SFL 85 Zip Code 11. Pursuant to the provisions of Sections 607:0502 and 607:1508. Florids Statutes. B7 City Code 12. Code Code Code Code Code Code Code Code	DIROS ALVARO					Addroce	/P.O. Box Number is Not A	rentable)		
B4 City FL 85 Zip Code						Address	ess (P.O. Box Number is Not Acceptable)			
President to the provisions of Sections 607,0502 and 607,1508. Florids Statutes the above-named corporation submits this statement for the purpose of changing its registered difficency in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am registered agent registered agent registered agent. I am registered agent registered agent. I am registered agent. I am registered agent registered agen	MIAMI FI	. 33183		83						
or registered agent, or both, in the State of Fordas. 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, Floridas Statutes. SIGNATURE				84	City	· · · · · · · · · · · · · · · · · · ·			=1 85 Zip	p Code
or registered agent, or both, in the State of Fordas. 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, Floridas Statutes. SIGNATURE	11. Pursuant to	the provisions of Sections 607.05	602 and 607.1508, Florida Statut	tes, the above-	named o	orporation	n submits this statement for	the purpose of	f changing its r	registered office
SIGNATURE Sign	or registere	d agent, or both, in the State of FI	orida. Such change was authoriz	zed by the corp	oration's	board of	f directors. I hereby accept t	he appointmen	it as registered	l agent. I am
12		,								
THE	S				rl signature	required whe				NOC IN LAC
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MIAMI FL 33183					T ADDRESS		VC (0-1)			
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CITY-ST-ZIP 64 CITY-ST-ZIP					T ADDRESS					
		certify that the information supplied	ed with this filing is voluntarily fun			alify for th	ne exemption stated in Section that my signature shall be	on 119.07(3)(k)	, Florida Statut	tes. I further

oath; that I am an officer or director of the corporation or the corporation or the appears in Block 12 or Block 13 if changed or on an attachment with an address. SIGNATURE: ¿

FREE OR PRINTED NAME OF SQUING OFFICER OR DIRECTOR