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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sanora B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

V63983

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in topes i loce e	Business	Mailing Addres	S\$				
520 EAST 46	TH ST.		46TH ST.				
HIALEAH FL 33013		HIALEAH	FL 33013			3. Date Incorporated or Qualified 09/15/1992	3a. Date of Last Report 04/25/1995
Principal Place	e of Business	2a. Mailing At	idress			4. FEI Number	Applied For
Р ппсіраі н асі	6 Ot Dributioss	26				65-0355861	Not Applicat
Suite, Apt. #,	etc.	Suite, Apt	i. #, etc			5. Certificate of Status Desired	\$8.75 Additional Fee Required
		27				Election Campaign Financing	\$5,00 May Be
City & State		City & Sta	ute			Trust Fund Contribution	Added to Fees
		28		Country		8. This corporation has liability for	intangible tax under s. 199.032,
Zip	Country	29	3			Florida Statutes Yes	i ∐No
	g. Name and Address of Curre			[10. Name and Address of New F	Registered Agent
	3.			81	Name		
CHAVE	Z, MONICA			82	Street Addr	ess (P.O. Box Number is Not Acceptat	ble)
	46TH ST.			_			
	H FL 33013			83			
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				84	City		FI 85 Zip Code
					L	ration submits this statement for the pured of directors. Thereby accept the app	
	Styrative typed or protections of registered up OFFICERS A	ND DIRECTORS		13.	т	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
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	PAG FACT ACTU OT						
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 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 certify that I am an officer or director of the comporation 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.

ALLONGS SUATE ? Durant