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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

FILED	
May 01 1997 8:00an	n
Secretary of State	

		Mailing Address 5870 SW 8TH ST SUITE 7 CORAL GABLES FL 3314 US	4-5052		3. Date Incorporated or Qualified 09/18/1992	d <b>3a.</b> C	ate of Last R /22/1996	
2. Principal P	lace of Business	2a. Mailing Address			4, FEI Number			plied For
]		26		····	65-0360763			t Applicable
Suite Apt.	# oto.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	
City & State	0	City & State	- 1 <sub>24</sub> ,		6. Election Campaign Financing	<del></del>	\$5.00	
		28			Trust Fund Contribution		Added 1	
Zip	Country	Zip	Country	1	8. This corporation has liability for			199.032,
<u> </u>	25 9. Name and Address of Current	29 t Registered Agent	30		Florida Statutes  10. Name and Address of New	Yes Registered		······································
PAII	ILA C. GOMEZ	. register ou rigoric	81	Name	M. transport state of the state of			<del></del>
	S.W. 8TH STREET, SUITE 7		82	Street Adde	ress (P.O. Box Number is Not Accep	lable)	<del></del>	
	ALHAMBRA CIR SUITE 1200			Silver Addi	descritor for language and vocab	table)		·····
Mial	MI FL 33144		83					
			84	City			85 Zip (	Code
	007.050	0. 1007.4500 51-11-0.1				FL		
	m familiar with, and accept the obliga	tions of, Section 607.0505, F	forida Statute	y the corporat s.	oration submits this statement for the tion's board of directors. I hereby ac-	cebt tile ab	pomunent as	registered
IGNATURE	Signatural hyperior princed has a of registered agen OFFICERS AND	nt and title if applicable (NC D DIRECTORS	DTE: Registered Ag		red when reinstating)  ADDITIONS/CHANGES TO OF	DATE	D DIRECTOR	3S IN 12
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14. I do hereby certify that the information supplies with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; the lam an officer or director of the corp varion 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 chapter 607, and attachment with an address.

SIGNATURE:

TO RES OFFICER ON DIRECTOR

4/17/97 (505) 261-2600