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Jun 02 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # V69515 (7)  
1. Corporation Name  
R.C. SOUTH FLORIDA ENTERPRISES, INC.



Principal Place of Business Mailing Address  
~~14643 S.W. 51 STREET~~ 2748 SW 137 Ave. ~~14643 S.W. 51 STREET~~ SAH  
MIAMI FL 33175 MIAMI FL 33175-5743

3. Date Incorporated or Qualified 10/08/1992  
3a. Date of Last Report 04/25/1996  
4. FEI Number 65-0360968  
Applied For Not Applicable  
5. Certificate of Status Desired  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt #, etc. 26 Suite, Apt #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

9. Name and Address of Current Registered Agent  
CEPERO, ROBERTO Cecilia G. CEPERO  
14643 S.W. 51 ST  
MIAMI FL 33175

10. Name and Address of New Registered Agent  
81 Name CECILIA G. CEPERO  
82 Street Address (P.O. Box Number is Not Acceptable) 14643 SW 51 ST.  
83 MIAMI, FL. 33175  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 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, Florida Statutes.

SIGNATURE Cecilia Cepero  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		
TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	CEPERO, ROBERTO	
STREET ADDRESS	14643 SW 51 ST	
CITY - ST - ZIP	MIAMI FL	
TITLE	DVS	<input checked="" type="checkbox"/> DELETE
NAME	CEPERO, MARTHA	
STREET ADDRESS	14643 SW 51 ST	
CITY - ST - ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	CECILIA G. CEPERO	
1.3 STREET ADDRESS	14643 SW 51 ST.	
1.4 CITY - ST - ZIP	MIAMI, FL. 33175	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied 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 oath; that I am an officer or director of the corporation 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.

SIGNATURE: X Cecilia Cepero  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date 4/24/97 (30) 525-1172  
Daytime Phone #

CR2E034 (9/96)