

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 30 AM 11:25

DOCUMENT # **620828** (4)

1. Corporation Name  
**REAL HOLDING MANAGEMENT, CORP.**

Principal Place of Business Mailing Address  
**9688 S.W. 24 STREET MIAMI FL 33165**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **05/23/1979** 3a. Date of Last Report **01/28/1994**

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

4. FEI Number **59-1944484** 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

9. Name and Address of Current Registered Agent  
**MARQUEZ, JOSE M.  
780 NW LE JUENE RD. STE 400  
MIAMI FL 33126**

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reappointing) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	<b>SD</b>
NAME	<b>GUERRA, JORGE</b>
STREET ADDRESS	<b>8440 SW 58 ST</b>
CITY - ST - ZIP	<b>MIAMI, FL 0</b>
TITLE	<b>VD</b>
NAME	<b>GUERRA, ARMANDO J</b>
STREET ADDRESS	<b>8450 S W 48TH STREET</b>
CITY - ST - ZIP	<b>MIAMI, FL 0</b>
TITLE	<b>PD</b>
NAME	<b>HERRAN, MANUEL A</b>
STREET ADDRESS	<b>8460 SW 5TH ST</b>
CITY - ST - ZIP	<b>MIAMI, FL 0</b>
TITLE	<b>TD</b>
NAME	<b>HERRAN, JOSE A</b>
STREET ADDRESS	<b>8455 GRAND CANAL DR</b>
CITY - ST - ZIP	<b>MIAMI FL</b>
TITLE	<b>V</b>
NAME	<b>JIMENEZ, DAVID</b>
STREET ADDRESS	<b>10321 SW 37 STREET</b>
CITY - ST - ZIP	<b>MIAMI FL</b>
TITLE	<b>AS</b>
NAME	<b>HERRAN, EZEQUIEL</b>
STREET ADDRESS	<b>14020 SW 38 STREET</b>
CITY - ST - ZIP	<b>MIAMI FL</b>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or 13, or both, of this report, or on a subsequent filing with this office.

SIGNATURE: **MANUEL A. HERRAN** (905)  
1/19/95 221-8351  
DATE: \_\_\_\_\_