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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # G42699 (0)

1. Corporation Name
CULLY CORPORATION OF MIAMI, INC.

Principal Place of Business: **7418 BIG CYPRESS DR. MIAMI LAKES FL 33014 US**

Mailing Address: **7418 BIG CYPRESS DR. MIAMI LAKES FL 33014 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/08/1983**

3a. Date of Last Report: **08/10/1994**

4. FEI Number: **65-0051784**

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

24 Zip Country

25 Country

28 Zip Country

30 Country

9. Name and Address of Current Registered Agent

**ROMERO, LUIS
7418 BIG CYPRESS DR.
HIALEAH FL 33014**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

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 _____ DATE _____

Signature: Typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-registering.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROMERO, LUIS	1.2 NAME	
STREET ADDRESS	7418 BIG CYPRESS DR.	1.3 STREET ADDRESS	
CITY, ST, ZIP	HIALEAH FL	1.4 CITY, ST, ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROMERO, NORMA	2.2 NAME	
STREET ADDRESS	7418 BIG CYPRESS DR.	2.3 STREET ADDRESS	
CITY, ST, ZIP	HIALEAH FL	2.4 CITY, ST, ZIP	
TITLE	TD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARCIA, MARIO	3.2 NAME	
STREET ADDRESS	7418 BIG CYPRESS DR.	3.3 STREET ADDRESS	
CITY, ST, ZIP	HIALEAH FL	3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		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 its receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in a supplemental filing with an address.

SIGNATURE: _____ DATE: **4/24/95**

LUIS R. ROMERO (Typed Name)