FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H63980 (7)

1. Corporation Name
MIAFAC, INC.

Principal Place of Business
% KATZ, BARRON, SQUITERO, LINDEN & FAUST
2699 SOUTH BAYSHORE DRIVE, SUITE 700-A
MIAMI FL 33133

Mailing Address
% KATZ, BARRON, SQUITERO, LINDEN & FAUST
2699 SOUTH BAYSHORE DRIVE, SUITE 700-A
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/26/1985
3a. Date of Last Report: 02/28/1994

2. Principal Place of Business
21 c/o Katz, Barron, Squitero & Faust, P.A.
Suite, Apt. # etc.
22 2699 S. Bayshore Dr.,
City & State
23 Miami, FL 33133
24 Zip 25 County

2a. Mailing Address
26
Suite, Apt. # etc.
27 7th Floor
City & State
28
29 Zip 30 Country

4. FEI Number: 65-0121291 ☐ 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

CORPCO, INC.
2699 SOUTH BAYSHORE DRIVE
SUITE 700-A
MIAMI FL 33133

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	~~BVPX~~ PD
NAME	KATZ, MICHAEL D.
STREET ADDRESS	2699 S BAYSHORE DR #700A
CITY-ST-ZIP	MIAMI FL
TITLE	DSV
NAME	SQUITERO, JOHN R.
STREET ADDRESS	2699 S BAYSHORE DR #700A
CITY-ST-ZIP	MIAMI FL
TITLE	~~XX~~
NAME	~~BARRON, RONALD MX~~
STREET ADDRESS	~~2699 S BAYSHORE DR #700A~~
CITY-ST-ZIP	~~MIAMI FL~~
TITLE	AS
NAME	CORPCO,INC.
STREET ADDRESS	2699 S.BAYSHORE DR,#700A
CITY-ST-ZIP	MIAMI FL
TITLE	VD
NAME	FAUST, Marc L.
STREET ADDRESS	2699 S. Bayshore Dr., 7th Fl.
CITY-ST-ZIP	Miami, FL 33133
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

200001476572
-05/05/95--01002--010
*****600.00 *****200.00

☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition
☐ Change ☐ Addition

8/5/1

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 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: ______ 1/13/95 (305) 856-2444

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOHN R. SQUITERO, Vice President

0133980 CP