

2000 UNIFORM BUSINESS REPORT (UBR)

3/2

FILED
May 11, 2000 8:00 am
Secretary of State

03-28-2000 90039 031 ***150.00

DOCUMENT # K34210

1. Entity Name

ALMAFIN BONDED WAREHOUSE CORP.

Principal Place of Business

Mailing Address

~~3000 NW 58TH ST
 MIAMI FL 33178
 US~~

~~3000 NW 58TH ST
 MIAMI FL 33178-1631
 US~~

2. Principal Place of Business

2801 Ponce de Leon Blvd.

Suite, Apt. #, etc
Suite 1010

City & State
Coral Gables, Florida

Zip
33134

Country
USA

3. Mailing Address

2801 Ponce de Leon Blvd.

Suite, Apt. #, etc
Suite 1010

City & State
Coral Gables, Florida

Zip
33134

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0078735**

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

~~YANEZ CARLOS
 9300 N.W-58 STREET
 SUITE 209
 MIAMI FL 33178~~

7. Name and Address of New Registered Agent

Name
CUNILL JAIME
 Street Address (P.O. Box Number is Not Acceptable)
2801 Ponce de Leon Blvd.
Suite 1010
 City **Coral Gables** **FL** Zip Code **33134**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

April 3, 2000
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	MARINAKYS, JUAN C	
STREET ADDRESS	9300 NW 58 ST STE 209	
CITY-ST-ZIP	MIAMI FL 33178	
TITLE	DPMS	<input checked="" type="checkbox"/> Delete
NAME	COHEN, MANUEL	
STREET ADDRESS	9300 NW-58TH ST., STE. 209	
CITY-ST-ZIP	MIAMI FL 33178	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	COHEN, MANUEL	
STREET ADDRESS	9300 N.W-58 STREET, STE. 209	
CITY-ST-ZIP	MIAMI FL 33178	
TITLE	VO	<input type="checkbox"/> Delete
NAME	CRESPIN, VITALIO	
STREET ADDRESS	9300 NW 58 ST STE 209	
CITY-ST-ZIP	MIAMI FL 33178	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARINAKYS, JUAN C	
STREET ADDRESS	2801 Ponce de Leon Blvd - Suite 1010	
CITY-ST-ZIP	Coral Gables, Fl. 3	
TITLE	PS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CUNILL, JAIME	
STREET ADDRESS	2801 Ponce de Leon Blvd - Suite 1010	
CITY-ST-ZIP	Coral Gables, Fl. 33134	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CRESPIN, VITALIO	
STREET ADDRESS	2801 Ponce de Leon Blvd. Suite 1010	
CITY-ST-ZIP	Coral Gables, Fl. 33134	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JAIME CUNILL
PRESIDENT

3/24/00
 DATE

(305) 444-2940
 Daytime Phone #

CF2F034 (9/99)