

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Division of Corporations
1901 North Bay Street
Tallahassee, Florida 32309-0001

APPROVED AND FILED
MAY 11 1995
TALLAHASSEE, FLORIDA

DOCUMENT # **L00713** (2)

HUCA PROPERTIES, CORP.

1. Principal Office Address 13759 SW 15 ST MIAMI FL 33184-2716		2a. Mailing Address 9001 94TH ST ATTN: OFALE MIAMI FL 33176 US		3. Date of Incorporation / Registered 07/10/1989		3a. Date of Last Report 02/28/1994	
21. Principal Office City	26. Mailing Address City	4. FE Number 65-0143329		Applied For / Not Applicable			
22. State of Office	27. State of Mailing Address	5. Certificate of State Design		<input type="checkbox"/> \$8.75 Additional Fee Required			
23. City & State	28. City & State	6. Federal Campaign Financing / Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees			
24. State of Incorporation	25. State of Registration	29. State of Incorporation		30. State of Registration			

9. Name and Address of Current Registered Agent MARQUEZ, JOSE M. 780 NW LEJEUNE RD SUITE 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. City				84. State			
				85. Zip Code			

11. Pursuant to the provisions of Sections 602, 603, and 607, Florida Statutes, the above named corporation submits the 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, thereby accept the appointment as registered agent. I am familiar with and accept the responsibility for the same. Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN '95	
NAME	PD HERRAN, MANUEL A. 8460 SW 5 ST MIAMI FL	TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D CALLEJA, ANGEL 7560 SW 78 CT W. MIAMI FL	TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D URALDE, ALDO 1310 SW 99 AVE MIAMI FL	TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D ALMEDA, HUMBERTO B. 408 NW 32 ST MIAMI FL	TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		TYPE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is accurately furnished and true and equally for the incorporation stated in the form filed with the Florida Department of State. I further certify that the information included on the annual report or supplementary annual report is true and accurate and that all applicants shall have the same legal effect as if they were made with their own signatures or those of the corporation or the registrar of Florida corporations. I hereby certify that the report is required by Chapter 607, Florida Statutes, and that the same appears in Block 12 or Block 13 of this report and in any other form with attachments.

SIGNATURE: _____ DATE: **4/25/95** (10) 95 505 5