

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L40785 (2)**

1. Corporation Name

COCONUT GROVE GLASS & MIRROR CORP.



Principal Place of Business

Mailng Address

C/O WILLIAM VALDES-ZUAZO
10471 S.W. 46 TERRACE
MIAMI FL 33165

C/O WILLIAM VALDES-ZUAZO
10471 S.W. 46 TERRACE
MIAMI FL 33165

2. Principal Place of Business

2a. Mailing Address

21

26

State - Add. A. etc.

State - Add. A. etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

01/03/1990

3a. Date of Last Report

02/03/1995

4. FFI Number

65-0167133

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

10. Name and Address of New Registered Agent

~~VALDES-ZUAZO, WILLIAM
10471 S.W. 46 TERRACE
MIAMI FL 33165~~

*Valdes-Zunzo William
4408 Ponce de Leon Bl
Miami Fla 33146
Coral Gables Fla.*

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 607.0602 and 607.1008, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office, principal place of business, 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 obligations of Section 607.0602, Florida Statutes.

SIGNATURE

Name and Title of Officer or Director

Name and Title of Registered Agent

Date

12. OFFICERS AND DIRECTORS

1. NAME
2. STREET ADDRESS
3. CITY, STATE, ZIP
4. TITLE
5. NAME
6. STREET ADDRESS
7. CITY, STATE, ZIP
8. TITLE
9. NAME
10. STREET ADDRESS
11. CITY, STATE, ZIP
12. TITLE
13. NAME
14. STREET ADDRESS
15. CITY, STATE, ZIP
16. TITLE

DELETE
D
VALDES-ZUAZO, WILLIAM
10471 SW 46 TERR.
MIAMI FL
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY, STATE, ZIP
5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY, STATE, ZIP
9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY, STATE, ZIP
13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY, STATE, ZIP
17. TITLE

Change Addition
*Valdes-Zunzo William
4408 Ponce de Leon Bl.
Coral Gables Fla. 33146*
 Change Addition
 Change Addition
 Change Addition
 Change Addition

14. I do hereby certify that the information supplied by this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(d), 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 by an officer or director of the corporation. The undersigned is duly empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Book 12 of Block 13 of the journal, or on an attached statement and exhibits.

SIGNATURE: *X*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
WILLIAM VALDES-ZUAZO

1/16/96
PRESIDENT

CR2E034 (12/95)