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 PM 1:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M06626** **(9)**

1. Corporate Name
MARGARITA'S HALLMARK INC.

Principal Place of Business
11489 SW 40 ST.
MIAMI FL 33165

Mailing Address
11489 SW 40 ST.
MIAMI FL 33165

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **10/17/1984**
3a. Date of Last Report: **04/26/1994**

2. Principal Place of Business
21
Suite Apt # or
22
City & State
23
24 25

2a. Mailing Address
26
Suite Apt # or
27
City & State
28
29 30

4. FEI Number: **59-2456474** 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. Does corporation intend to change its name under 607.1005 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

DESERNA, MARGARITA
11489 SW 40 ST.
MIAMI FL 33165

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 Section 607.0502 and 607.1008 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

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	GOMEZ, GUSTAVO
STREET ADDRESS	12011 SW 119 ST
CITY ST ZIP	MIAMI FL
TITLE	VSD
NAME	DE SERNA, MARGARITA
STREET ADDRESS	11489 SW 40 ST.
CITY ST ZIP	MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

14. I do hereby certify that the information supplied with this report, voluntarily furnished and does not apply for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on the 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 above or on attached sheet with an officer.

SIGNATURE: 2-20-95 (305)552-6395

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MARGARITA DE SERNA, Vice President

0170199 CP