

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

07 MAR 28 PM 3:04

DOCUMENT # **M26216** (5)

1. Corporation Name
SANGIRORI, INC.

Principal Place of Business

10275 SW 77 CT
SUITE 200-
MIAMI FL 33156
US

Mailing Address

10275 SW 77 CT
SUITE 200-
MIAMI FL 33156
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/22/1986

3a. Date of Last Report

02/02/1994

4. FEI Number

59-2693000

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 10275 S.W. 77 CT

22 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip 25 Country 29 33156 30 U.S.A.

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

RAPPORT, STEPHEN R.
255 ALHAMBRA CIRCLE
SUITE 600
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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

Signature of Registered Agent (Print Name and Title of Applicant)

Write Registered Agent Signature (Signed when Submitting)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP
NAME	DE LEO, RICARDO
STREET ADDRESS	10275 SW 77 CT
CITY, ST, ZIP	MIAMI FL
TITLE	CD
NAME	DE LEO, SANTE
STREET ADDRESS	10275 SW 77 CT
CITY, ST, ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.071(4)(b), Florida Statutes. Further, I certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it would under oath. That I am an officer or director of the corporation on the record or having control over the record on this report as required by Chapter 1107, Florida Statutes, and that my name appears in Block 12, or Block 13 if changed, on this attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ricardo De Leo

1/9/95

305 264-0779