

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M43404** (6)

1. Corporation Name

ANDROS GROUP INCORPORATED



Principal Place of Business

C/O JONATHAN H. WARNER
175 NW ST AVE., 11TH FLOOR
MIAMI FL 33126-4255

Mailing Address

1330 CORAL WAY
#103
MIAMI FL 33145
US

3. Date Incorporated or Qualified
12/17/1986

3a. Date of Last Report
06/22/1995

2. Principal Place of Business

2a. Mailing Address

21 C/O Jonathan H. Warner
Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 Suite 1600, 701 Brickell Ave
City & State

27 City & State

23 Miami, Florida
Zip

28 Zip

24 33131

Country

29 Country

30 Country

4. FEI Number

59-2797356

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WARNER, JONATHAN H.
175 NW ST AVE., 11TH FLOOR
MIAMI FL 33128-8817

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 607.0502 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, typed or printed name of registered agent and, if applicable,

(NOTE: Registered Agent Signature Required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PD
STREET ADDRESS TINIACOS, DEMETRIO
CITY-STATE-ZIP 1330 CORAL WAY #103
MIAMI FL

TITLE ☐ DELETE
NAME T
STREET ADDRESS TINIACOS, EFSTRATIA C DE
CITY-STATE-ZIP 1330 CORAL WAY #103
MIAMI FL

TITLE ☐ DELETE
NAME S
STREET ADDRESS TINIACOS, ALEJANDRO
CITY-STATE-ZIP 1330 CORAL WAY #103
MIAMI FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, 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 if changed, or on an attachment with an address.

SIGNATURE:

Alejandro Tiniacos C.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEB/22/96
Date

305-858-0285
Daytime Phone #

CR2E034 (12/95)