

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

APPROVED AND FILED

1995 APR 28 PM 1:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995

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



DOCUMENT # M60741 (9)

1. Corporation Name
ISLAS CANARIAS SOUTH, INC.

Principal Place of Business: **1036 S.W. 1ST STREET MIAMI FL 33130**

Mailing Address: **1036 S.W. 1ST STREET MIAMI FL 33130**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 1036 S.W. 1 ST.		26		10/14/1987		05/01/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		65-0011476		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23 MIAMI FLORIDA		28		<input type="checkbox"/>		\$5.00 May Be Added to Fees	
Zip		Country		Zip		Country	
24 33130		25 U.S.		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

9. Name and Address of Current Registered Agent: **FLORIDA ANNUAL REPORT SERVICE/CANERA & ASSOCIATES INC. 1036 S.W. 1 ST. MIAMI FL 33130**

10. Name and Address of New Registered Agent: **FLORIDA ANNUAL REPORT SERVICES INC. 1036 S.W. 1 ST. MIAMI FL 33130**

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]* **AMADA C. LOPEZ, PRES** DATE: **4/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ANDRADE, LUIS	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1036 SW 1ST ST.	12. NAME	
STREET ADDRESS	MIAMI FL 33130	13. STREET ADDRESS	
CITY, ST, ZIP		14. CITY, ST, ZIP	
TITLE	ST ANDRADE, NANCY	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1036 SW 1ST ST.	22. NAME	
STREET ADDRESS	MIAMI FL 33130	23. STREET ADDRESS	
CITY, ST, ZIP		24. CITY, ST, ZIP	
TITLE		31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY, ST, ZIP		34. CITY, ST, ZIP	
TITLE		41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY, ST, ZIP		44. CITY, ST, ZIP	
TITLE		51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY, ST, ZIP		54. CITY, ST, ZIP	
TITLE		61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY, ST, ZIP		64. CITY, ST, ZIP	

600001475026
-05/04/95--01014--002
****200.00 ****200.00

[Handwritten initials]

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, whichever is appropriate, or on an addendum with an address.

SIGNATURE: *[Signature]* **NANCY ANDRADE** DATE: **4/95**