

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M93234** (6)
1. Corporation Name
REBULL GROUP, INC.



Principal Place of Business: **2600 DOUGLAS RD. STE. 500 CORAL GABLES FL 33134**
Mailing Address: **2600 DOUGLAS RD. STE. 500 CORAL GABLES FL 33134**

2. Principal Place of Business: 21 Subj., Apt., #, etc. 22 City & State 23 Zip Country 25
2a. Mailing Address: 26 Subj., Apt., #, etc. 27 City & State 28 Zip Country 29 30

3. Date Incorporated or Qualified: **08/09/1988** 3a. Date of Last Report: **01/20/1995**
4. FEI Number: **65-007747** 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

**REBULL, JULIO G., SR.
2600 DOUGLAS RD.
STE. 500
MIAMI FL 33134**

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 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. Thereby 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 (required for all filings)
OFFICERS AND DIRECTORS

Registered Agent Signature (required when changing)

DATE

12. OFFICERS AND DIRECTORS
1. TITLE: **P** DELETE
2. NAME: **REBULL, JULIO GONZALEZ SR.**
3. STREET ADDRESS: **2600 DOUGLAS RD., STE. 500**
4. CITY, ST., ZIP: **CORAL GABLES FL 33134**
5. TITLE: DELETE
6. NAME:
7. STREET ADDRESS:
8. CITY, ST., ZIP:
9. TITLE: DELETE
10. NAME:
11. STREET ADDRESS:
12. CITY, ST., ZIP:
13. TITLE: DELETE
14. NAME:
15. STREET ADDRESS:
16. 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:

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: *Julio Rebull*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96

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446-9234

CR2E034 (12/95)