

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

APPROVED  
AND  
FILED

CORPORATION  
ANNUAL REPORT  
**1995**



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

95 FEB 27 PM 3:18

**DOCUMENT # P94000088637 (1)**  
1. Corporation Name  
**NEW ERA, INC.**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**11350 S.W. 95TH ST.  
MIAMI FL 33176**

Mailing Address  
**11350 S.W. 95TH ST.  
MIAMI FL 33176**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**12/07/1984**

3a. Date of Last Report

4. FEI Number  
**65-0538934**

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

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip Country

28. Zip Country

24. Zip Country

25. Zip Country

29. Zip Country

30. Zip Country

9. Name and Address of Current Registered Agent

**STEFANO, MIRIAM  
11350 S.W. 95TH ST.  
MIAMI FL 33176**

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 *Miriam Stefano* **Miriam Stefano** **2-6-95**

12. OFFICERS AND DIRECTORS

TITLE **D/P**

NAME **STEFANO, MIRIAM**

STREET ADDRESS **11350 S.W. 95TH ST.**

CITY - ST - ZIP **MIAMI FL 33176**

TITLE **D**

NAME **STEFANO, NANCY**

STREET ADDRESS **11350 S.W. 95TH ST.**

CITY - ST - ZIP **MIAMI FL 33176**

TITLE **D**

NAME **STEFANO, ANDRES**

STREET ADDRESS **11350 S.W. 95TH ST.**

CITY - ST - ZIP **MIAMI FL 33176**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D/P**  Change  Addition

1.2 NAME **Miriam Stefano**

1.3 STREET ADDRESS **11350 SW 95 ST**

1.4 CITY - ST - ZIP **MIAMI FL 33176**

2.1 TITLE **VP/D**  Change  Addition

2.2 NAME **NANCY Stefano**

2.3 STREET ADDRESS **11350 SW 95 ST**

2.4 CITY - ST - ZIP **MIAMI FL 33176**

3.1 TITLE **Sec**  Change  Addition

3.2 NAME **Andres Stefano**

3.3 STREET ADDRESS **11350 SW 95 ST**

3.4 CITY - ST - ZIP **MIAMI FL 33176**

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 119.071(9)(b), 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 in an amendment with an address.

SIGNATURE: *Miriam Stefano* **Miriam Stefano** **2-6-95** **(305) 2745860**