FILE NOW: FILING FEE AFTER MAY 1 IS $[illegible]5.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMEN[illegible] STATE
Sandra B. Mor[illegible]
Secretary of S[illegible]
DIVISION OF CORPO[illegible]IONS

DOCUMENT # **P94000079114 (2)**

1. Corporation Name

RESTREPO DESIGN GROUP, INC.

Principal Place of Business
9310 S.W. 103 AVE.
MIAMI FL 33176

Mailing Address
9310 S.W. 103 AVE.
MIAMI FL 33176

3. Date Incorporated or Qualified: **10/27/1994**
3a. Date of Last Report: **04/28/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: **65-0531240** 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

THE LAW FIRM OF LAWRENCE J. SPIEGEL, CHART
D/B/A AMERILAWYER
343 ALMERIA AVE.
CORAL GABLES 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: MARGARITA RESTREPO MARGARITA RESTREPO PRESIDENT 4/29/96
Signature (typed or printed name of registered agent) (title if applicable) (NEW REGISTERED AGENT signature required when resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	RESTREPO, MARGARITA
STREET ADDRESS	9310 S.W. 103 AVE.
CITY-ST-ZIP	MIAMI FL 33176
☐ DELETE	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ DELETE	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ DELETE	
TITLE	
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STREET ADDRESS	
CITY-ST-ZIP	
☐ DELETE	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ DELETE	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
☐ DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VICE PRESIDENT ☐ Change ☑ Addition
1.2 NAME	RESTREPO, MARTA
1.3 STREET ADDRESS	9310 S.W. 103 AVE.
1.4 CITY-ST-ZIP	Miami, FL 33176
2.1 TITLE	TREASURER, SECRETARY ☐ Change ☑ Addition
2.2 NAME	RESTREPO, ANA M.
2.3 STREET ADDRESS	9310 S.W. 103 AVE.
2.4 CITY-ST-ZIP	Miami, FL 33176
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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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: MARGARITA RESTREPO MARGARITA RESTREPO 4/29/96 (305)595-9783
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #