

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **P94000079878 (2)**

1. Corporation Name
ECUA-COPY, INC.

95 MAY -1 PM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**15480 SW 73RD LN #1
MIAMI FL 33193**

Mailing Address
**15480 SW 73RD LN #1
MIAMI FL 33193**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
10/31/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-0535392

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State

City & State
MIAMI FLORIDA

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

24

25

Country

29

Zip

30

Country

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**ANDA, SANTIAGO
7429 SW 152ND AVE #103
MIAMI FL 33193**

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 title if applicable)

(833)E Registered Agent signature required when filing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**
NAME **ANDA, PEDRO**
STREET ADDRESS **15480 SW 73RD LN #1**
CITY- ST- ZIP **MIAMI FL 33193**

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

TITLE **D**
NAME **ANDA, SANTIAGO**
STREET ADDRESS **7429 SW 152ND AVE #103**
CITY- ST- ZIP **MIAMI FL 33193**

21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

51 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 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 110.07(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: Santiago Andra **SANTIAGO ANDRA** 4/25/95 (305)267-8836
Signature and typed or printed name of signing officer or director Date Name