

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000031440 (7)**

1. Corporation Name  
**OPTIMA GRAPHICS CORPORATION**



Principal Place of Business: 9350 SOUTH DIXIE HIGHWAY PH2 MIAMI FL 33156  
Mailing Address: 9350 SOUTH DIXIE HIGHWAY PH2 MIAMI FL 33156

2. Principal Place of Business: 21 8530 S.W. 149 Ave, 22 906, 23 Miami, FL, 24 33193, 25 U.S.  
2a. Mailing Address: 26 SAME AS PRINCIPAL PLACE OF BUSINESS, 27, 28, 29, 30

3. Date Incorporated or Qualified: 04/21/1995, 3a. Date of Last Report: 04/21/1995  
4. FEI Number: 65-0584609, Applied For: Not Applicable  
5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing: \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 190.032, Florida Statutes: Yes

9. Name and Address of Current Registered Agent: ROTH, LEONARD A, 9350 SOUTH DIXIE HIGHWAY, PENTHOUSE TWO, MIAMI FL 33156

10. Name and Address of New Registered Agent: 81 Name: Ramundo Lopez-Lina Levi, CPA, 82 Street Address: Lopez Levi & Associates, P.A., 83 815 N.W. 57th Ave #304, 84 City: Miami, FL, Zip Code: 33126-2042

11. I, the undersigned, certify that the information supplied herein 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 supplement if 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 referee 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, of this report.

SIGNATURE: [Signature]

12. OFFICERS AND DIRECTORS: 12.1 NAME: HURTADO, JOSE S, 12.2 STREET ADDRESS: CALLE 11 NO. 22-51 AA 34905, 12.3 CITY, ST. ZIP: SANTAFE DE BOGOTA DC COLOMBI, 12.4 TITLE: D, 12.5 NAME: ZAPATA, IVAN D, 12.6 STREET ADDRESS: CALLE 11 NO. 22-51 AA 34905, 12.7 CITY, ST. ZIP: SANTAFE DE BOGOTA DC COLOMBI, 12.8 TITLE: D, 12.9 NAME: SAENZ, IVAN J, 12.10 STREET ADDRESS: CALLE 11 NO. 22-51 AA 34905, 12.11 CITY, ST. ZIP: SANTAFE DE BOGOTA DC COLOMBI, 12.12 TITLE: P, 12.13 NAME: BUITRAGO, JUAN, 12.14 STREET ADDRESS: 8530 S.W. 149TH AVENUE, APT. 906, 12.15 CITY, ST. ZIP: MIAMI FL 33193

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12: 13.1 NAME, 13.2 STREET ADDRESS, 13.3 CITY, ST. ZIP, 13.4 TITLE, 13.5 NAME, 13.6 STREET ADDRESS, 13.7 CITY, ST. ZIP, 13.8 TITLE, 13.9 NAME, 13.10 STREET ADDRESS, 13.11 CITY, ST. ZIP, 13.12 TITLE, 13.13 NAME, 13.14 STREET ADDRESS, 13.15 CITY, ST. ZIP

14. I, the undersigned, certify that the information supplied herein 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 supplement if 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 referee 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, of this report.

SIGNATURE: [Signature]

1-29-96

CR2E034 (12/95)