FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 29 1997 8:00am Secretary of State

1997

DOCUMENT # P95000080209 (6)

ROSE D. VAZQUEZ, INC.

Principal Place of Business	Mailing Ac	idress			1 100010011100	iaini ahibi dalih dalih Edil	I) IIIIII II II IIII	1011 100
5237 S.W. 139TH COURT MIAMI FL 33175	5237 S.W. MIAMI FL S	139TH COURT 33175-5187							
					3. Date Incorpo	orated or Qualified	3a. Date o		port
2. Principal Place of Business 21 14711 5w /5			154 16	errace	4. FEI Number 05-0615	087 65-06	15087		olied For Applicable
Suile, Apt #, etc.	27	Apt #, etc.			5. Certificate of	Status Desired	_ \$	8.75 A	
City & State 23 MIAMI	FL 28 MIA	State 771	FL		6. Election Can Trust Fund C	npaign Financing Contribution		\$5.00 h Added to	
ZIP 33187 25	Country Zip 33		Country	A	Florida Statu		Yes X	lo	199.032,
	Address of Current Registered A	gent			10. Name and A	ddress of New Re	gistered Age	nt	
VAZQUEZ, ROSE			81	Name Ros	Z D. VA	lawez			
5237 S.W. 139TH COURT MIAMI FL 33175				Street Addres	s (P.O. Box Num	ber is Not Acceptat	ole)		
WEAM LE GOILO			83	14/11	-، صد	TIERC		 	
			84 (City MI A	201		FL 8	5 Zp-5	P98 7
11. Pursuant to the provisions	gl Sections 607.0502 and 607.1508,	Florida Statutes,	the above-n	amed coroor	ation submits this	statement for the r	ournose of cha	anging its	registered
office or registered rigent agent. I am familiar with,	or both, in the State of Florida. Such and accept the obligations of, Section	i change was auth n 607.0505. Florid	norized by th a Statutes.	ne corporation	n's board of direc	tors. I hereby accer	pt the appoint	ment as re	egistered
SIGNATURE / 4	Mila					j	1-15-	97	
Signal recityped or pr	inted not le of registered at unit and title if applicabil	e (NOTE: Re	egistered Agent s	signature required	when reinstating)		DATE		
12.	AFFICERS AND DIRECTORS		13.			HANGES TO OFFIC			
TITLE PSTD NAME VAZQUEZ, F	MOSE D	☐ DELETE	1.1 TITLE	' ^	TD W	1201162		Change	☐ Addition
FAAT 0 14/ 4	39TH COURT		1.2 NAME		56 10 V/	LLAUEZ 154 TERRY	an L		
LHAME CL OF			1.3 STREET ADI			3318	7		
TITLE MICHIEL 33		DELETE	1.4 CITY - ST - Z 2.1 TITLE	(IP / //	IAMI, F	2010		Change	4.3.350
NAME		C) DECEME					لبا	Change	☐ Addition
SIREEL ADDRESS			2.2 NAME	nbree					
CITY ST-ZIP			2.3 STREET ADI						
TITLE		DELETE	2. 4 CITY - ST - 7 3.1 TITLE	tir			П	Change	Addition
NAME			3.2 NAME						, 1901/211
STREET ADDRESS			3.3 STREET ADI	DRESS					
CITY - ST - ZIP			3.4 CITY-ST-2						
TITLE		DELETE	4.1 TITLE					Change	Addition
NAME			4. 2 NAME				_	-	

64 CITY-ST-ZIP

14. If do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 clyarged, or on an attachment with an address.

4.3 STREET ADDRESS

53 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

52 NAME

61 TITLE

62 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CHY-SI-7/P

CITY - \$1 - 7IP

TILLE

NAME

THILE

NAME

SIGNATURE AND TYPER OR PRINTER NAME OF SIGNING OFFICER OR DIR

1-15-97

(Sur) 543-3795

☐ Change

Change

Addition

Addition