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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

CORPORATION  
ANNUAL REPORT  
1995

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



DOCUMENT # **S11410** (5)

1. Corporation Name  
**KABAYAN, INC.**

Principal Place of Business Mailing Address

**398 CHALLENGER RD  
SUITE 102  
CAPE CANAVERAL FL 32920  
US**

**398 CHALLENGER RD  
STE 102  
CAPE CANAVERAL FL 32920  
US**

3. Date Incorporated or Qualified **10/29/1990** 3a. Date of Last Report **04/21/1994**

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. 25. 29. 30.

4. FEI Number **59-3032232** 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

6. This corporation has liability for intangible tax under S. 195.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

**FERNANDO, ROMEO D., JR.  
367 EMERSON DR NW  
PALM BAY FL 32907**

10. Name and Address of New Registered Agent

81 Name **Romeo D. Fernando, Jr.**

82 Street Address (P.O. Box Number is Not Acceptable) **399 Challenger Rd.**

83 **Suite 102**

84 City **Cape Canaveral FL** 85 Zip Code **32920**

11. Pursuant to the provisions of Sections 607.050 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 *Romeo D. Fernando, Jr.* DATE **4-24-95**

Signature, typed printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) DATE

12. OFFICERS AND DIRECTORS

TITLE **P**

NAME **FERNANDO, ROMEO D., JR.**

STREET ADDRESS **367 EMERSON DR., NW**

CITY - ST - ZIP **PALM BAY FL**

TITLE **ST**

NAME **VILLARUZ, FE V.**

STREET ADDRESS **367 EMERSON DR., NW**

CITY - ST - ZIP **PALM BAY FL**

TITLE **V**

NAME **VILLARUZ, OSCAR V**

STREET ADDRESS **367 EMERSON DR NW**

CITY - ST - ZIP **PALM BAY FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE  Change  Addition

2.2 NAME **Resigned**

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE  Change  Addition

3.2 NAME **Resigned**

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

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 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 unempowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or appears on an attachment with an address.

SIGNATURE: *Romeo D. Fernando, Jr.* **ROMEO D. FERNANDO, JR.** DATE **4-24-95 (407) 783-0187**

Signature and typed name of signing officer or director Date (Typed Name)