

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

**APPROVED
AND
FILED**

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # V74213

1. Corporation Name

FRA-DAN CORPORATION

DO NOT WRITE IN THIS SPACE.

Principal Place of Business: **4860 N.W. 7 St. Miami, FL 33026**
Mailing Address: **4860 N.W. 7 St. Miami, FL 33026**

3. Date Incorporated or Qualified: **Oct. 26, 1992** 3a. Date of Last Report: **1994**

2. Principal Place of Business: **4860 N.W. 7 St. Miami, FL 33026**
2a. Mailing Address: **4860 N.W. 7 St. Miami, FL 33026**
21. Suite, Apt. #, etc.: 26. Suite, Apt. #, etc.:
22. City & State: 27. City & State:
23. Zip: Country: 28. Zip: Country:
24. Zip: Country: 29. Zip: Country:

4. FEI Number: **65-0419151** 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
**Gaston R. Alvarez
1313 Ponce de Leon Blvd.
Coral Gables, FL**

10. Name and Address of New Registered Agent
81. Name: **Glauco Guillen**
82. Street Address (P.O. Box Number is Not Acceptable): **3094 N.W. 13 St.**
83. City: **Miami** 84. Zip Code: **FL 33125**

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]* DATE: **3/21/95**

12. OFFICERS AND DIRECTORS

TITLE	President
NAME	GLAUCO GUILLEN
STREET ADDRESS	3094 N.W. 13 St.
CITY - ST - ZIP	Miami, FL 33125
TITLE	Vice-President
NAME	JORGE RODRIGUEZ
STREET ADDRESS	15610 SW. 53 Terr.
CITY - ST - ZIP	Miami, FL 33193
TITLE	Secretary
NAME	KENIA RODRIGUEZ
STREET ADDRESS	15610 S.W. 53 Terr.
CITY - ST - ZIP	Miami, FL 33193
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	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	5.00001463295
2.3 STREET ADDRESS	-04/24/95--01056--014
2.4 CITY - ST - ZIP	***200.00 ***200.00
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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, and that I have attached an attachment with an address.

SIGNATURE: *[Signature]* DATE: **3/21/95** 634-1566
227-5969
[Signature] 4-20-95