

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 PM 1:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L22349** (9)

1. Corporation Name

NUWAY INTERNATIONAL, INC.

Principal Place of Business

1780 NW 93RD AVE.
MIAMI FL 33172

Mailing Address

1780 NW 93RD AVE.
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **10/11/1989** 3a. Date of Last Report **08/01/1994**

4. FBI Number **65-0323720** 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 C. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
8500 N.W. 30th TRLK. **SHR**

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State
MIAMI, FL.

23 Zip 28 Country
33122 **DAVE**

24 25 29 30

9. Name and Address of Current Registered Agent

ACEVEDO, EDUARDO
1780 NW 93RD AVE.
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Numbers Not Acceptable)
8500 N.W. - 30th TRLK.
83
84 City **MIAMI** FL 85 **33122**

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 date of appointment

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD**
NAME **ACEVEDO, EDUARDO**
STREET ADDRESS **1780 NW 93RD AVENUE**
CITY - ST - ZIP **MIAMI FL**

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS **8500 N.W. 30th TRLK.**
14 CITY - ST - ZIP **MIAMI FL 33122**

TITLE **VD**
NAME **ARIAS, JUAN L.**
STREET ADDRESS **4A AVENDIA 2-44, ZONA 10**
CITY - ST - ZIP **GUATEMALA, C.A.**

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

TITLE **SD**
NAME **MIRON, EDUARDO**
STREET ADDRESS **4A AVENDIA 2-44, ZONA 10**
CITY - ST - ZIP **GUATEMALA, C.A.**

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 119.07(3)(b), 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 owner 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 as an attachment with an address.

SIGNATURE:

[Handwritten Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/95 **305-470-207**
DATE TELEPHONE #