

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 14 PM 4:23

DOCUMENT # **V62807** (5)

1. Corporation Name
BESTUNA, INC.

Principal Place of Business

2601 S BAYSHORE DR
SUITE 1225
MIAMI FL 33133

Mailing Address

2601 S BAYSHORE DR
SUITE 1225
MIAMI FL 33133

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **09/10/1992** 3a. Date of Last Report **08/09/1994**

4. FEI Number **65-0402637** 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. 190.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business **7225 N.W. 25th Street** 2b. Mailing Address **7225 N.W. 25th Street**

22. Suite, Apt. #, etc. **27** Suite, Apt. #, etc. **27**

23. City & State **Miami, Florida** 28. City & State **Miami, Florida**

24. Zip **33122** Country **USA** 29. Zip **33122** Country **USA**

9. Name and Address of Current Registered Agent

E.H.G. RESIDENT AGENTS, INC.
2601 S BAYSHORE DR
SUITE 1225
MIAMI FL 33133

10. Name and Address of New Registered Agent

61. Name **5100 Town Center Circle**
62. Street Address (P.O. Box Number is Not Acceptable)
63. Suite 330
64. City **Boca Raton** FL 65. Zip Code **33486**

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE By: **Edward H. Gilbert, President**

(Signature, typed or printed name of registered agent and the applicant)

(Signature, typed or printed name of registered agent and the applicant)

DATE

12. OFFICERS AND DIRECTORS

11. TITLE **P**
NAME **CEVALLOS, CARLOS**
STREET ADDRESS **2601 SOUTH BAYSHORE DR, #1225**
CITY, ST, ZIP **MIAMI FL**

11. TITLE **P/D**
NAME **David Cevallos**
STREET ADDRESS **7225 N.W. 25th Street**
CITY, ST, ZIP **Miami, FL 33122**

11. TITLE **S/D**
NAME **Medardo Cevallos**
STREET ADDRESS **7225 N.W. 25th Street**
CITY, ST, ZIP **Miami, FL 33122**

11. TITLE **D**
NAME **Alberto Cevallos**
STREET ADDRESS **7225 N.W. 25th Street**
CITY, ST, ZIP **Miami, FL 33122**

11. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

11. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE **D** ☒ Change ☐ Addition

12. NAME
13. STREET ADDRESS **7225 N.W. 25th Street**
14. CITY, ST, ZIP **Miami, FL**

21. TITLE ☐ Change ☐ Addition

22. NAME
23. STREET ADDRESS
24. CITY, ST, ZIP

31. TITLE ☐ Change ☐ Addition

32. NAME
33. STREET ADDRESS
34. CITY, ST, ZIP

41. TITLE ☐ Change ☐ Addition

42. NAME
43. STREET ADDRESS
44. CITY, ST, ZIP

51. TITLE ☐ Change ☐ Addition

52. NAME
53. STREET ADDRESS
54. CITY, ST, ZIP

61. TITLE ☐ Change ☐ Addition

62. NAME
63. STREET ADDRESS
64. CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.02(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 treasurer 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 filing or on an attachment with an address.

SIGNATURE: **David Cevallos, President**

2/9/95

(Signature, typed or printed name of signing officer or director)

DATE

(Signature, typed or printed name of signing officer or director)