

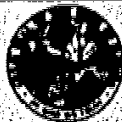
FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 449007

(4)

1. Corporation Name

M.V.P. INVESTMENT CORPORATION

Principal Place of Business

1101 BRICKELL AVENUE
SUITE 401
MIAMI FL 33131

Mailing Address

1101 BRICKELL AVENUE
SUITE 401
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/21/1974

3a. Date of Last Report

04/28/1994

4. FEI Number

59-1586071

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. 189.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

25

Suite, Apt. #, etc.

26

City & State

27

Zip

Country

28

Zip

Country

29

Zip

Country

30

9. Name and Address of Current Registered Agent

ANGULO, FRANCISCO
1101 BRICKELL AVENUE
SUITE 401
MIAMI FL 33131

10. Name and Address of New Registered Agent

01 Name

Patricio Silva

02 Street Address (P.O. Box Number is Not Acceptable)

1101 BRICKELL AVENUE, SUITE 401

03

04 City

MIAMI

FL

05

Zip Code

33131

11. Pursuant to the provisions of Sections 607.0507 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

Patricio Silva

PATRICIO SILVA

4-13-95

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D
ENNIST ALBERT L
95 RIVER STREET, STE 411
HOBOKEN NJ

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD
CRANE, STEPHEN V.
11 MAIN STREET
CAMDEN ME

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

SD
PEEPLES, CECILE
155 OCEAN LN., DR., 1101
KEY BISCAYNE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

ANGULO, FRANCISCO
1101 BRICKELL AVE., SUITE 401
MIAMI 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

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

D
Ana Luisa Estrada
1101 Brickell Avenue, #401
MIAMI, FL 33131

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

P
Stephen V. Crane
11 Main Street
Camden, ME

☒ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

S
Cecile Peoples
155 Ocean Lane Dr. 1101
Key Biscayne, FL.

☒ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

T
Adriana Gonzalez
1101 Brickell Avenue, #401
Miami, FL. 33131

☒ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

D
Sylvia Estrada
1101 Brickell Avenue, #401
MIAMI, FL. 33131

☐ Change ☒ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

D
Ana M. de Estrada
1101 Brickell Avenue, #401
MIAMI, FL. 33131

☐ Change ☒ Addition

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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Adriana Gonzalez

SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/95

Date

305.358-7251

Telephone #