

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000091372 (9)

1. Corporation Name

203 CORPORATION



Principal Place of Business

3636 NW 22 AVE  
MIAMI FL 33142

Mailing Address

3636 NW 22 AVE  
MIAMI FL 33142

2. Principal Place of Business

21 3111 N.W. 27 Ave.

Suite, Apt. #, etc.

22

City & State

23 Miami, Fl.

Zip

24 33142

Country

25 U.S.A.

2a. Mailing Address

26 P.O. BOX 420769

Suite, Apt. #, etc.

27

City & State

28 Miami, Fl. 33242

Zip

29 33242

Country

30 U.S.A.

3. Date Incorporated or Qualified

11/29/1995

3a. Date of Last Report

4. FEI Number

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

HERNANDEZ, GILBERTO  
3636 NW 22 AVE  
MIAMI FL 33142

10. Name and Address of New Registered Agent

81 Name

LOPEZ, ORLANDO

82

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

3111 N.W. 27 Ave.

83

84 City

Miami

FL

85 Zip Code  
33242

11. Pursuant to the provisions of Sections 607.0632 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, to 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 the day, place

NOTE: Registered Agent signature required when resigning

DATE

ORLANDO LOPEZ

2-21-96

12. OFFICERS AND DIRECTORS

TITLE

P

☐ DELETE

NAME

PIERRE-LOUIS, FERNAND

STREET ADDRESS

3111 N.W. 27 Ave.

CITY- ST- ZIP

Miami, Fl. 33142

TITLE

V

☐ DELETE

NAME

HERNANDEZ, GILBERTO

STREET ADDRESS

3111 N.W. 27 Ave.

CITY- ST- ZIP

Miami, Fl. 33142

TITLE

S

☐ DELETE

NAME

GONZALEZ, CRISTOBAL

STREET ADDRESS

3111 N.W. 27 Ave.

CITY- ST- ZIP

Miami, Fl. 33142

TITLE

T

☐ DELETE

NAME

PEREZ, AMERICO

STREET ADDRESS

3111 N.W. 27 Ave.

CITY- ST- ZIP

Miami, Fl. 33142

TITLE

D

☐ DELETE

NAME

PEREZ, SIXTO

STREET ADDRESS

3111 N.W. 27 Ave.

CITY- ST- ZIP

Miami, Fl. 33142

TITLE

D

☐ DELETE

NAME

LOPEZ, MANUEL

STREET ADDRESS

3111 N.W. 27 Ave.

CITY- ST- ZIP

Miami, Fl. 33142

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

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

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 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 if changed, or as a new addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GILBERTO HERNANDEZ 2-21-96 305 885 0000

Date

Daytime Phone #

CR2E034 (12/95)