SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** P94000010242 (3) **DAMM! CORPORATION OF MIAM!** Principal Place of Business Mailing Address 8258 SW 148TH PL 8258 SW 148TH PL MIAM! FL 33193 MIAMI FL 33193 3. Date Incorporated or Qualified 3a. Date of Last Report 02/08/1994 04/17/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0458741 Not Applicable Suite, Apt. #. etc. Suite. Apt. #, etc. \$8.75 Additional 22 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıρ Country Zio Country 8. This corporation has liability for intangible tax under s. 199 032. 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name IGLESIAS, ABELARDO G 3800 PALM AVE #203 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33012 83 84 City Zip Code 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. Thereby accept the appointment as registered agent. I am familiar v. th, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Stgnature, type-tizar printed name of registered agent and title it applicable (NOTE_Registered Agent sign were required when religions) DARE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/E)THILE DELETE LI TITLE Change Addition NAME IGLESIAS, ARTURO T 1.2 NAME CR2E034 8258 SW 148TH PL STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33193** CITY-ST-2IP 14 CITY - ST - ZIP TITLE DELETE 2 1 TITLE Change Addition IGLESIAS, DAISY M NAME 2.2 NAME 8258 SW 148TH PL STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33193** CITY - ST - ZIP 2 4 CHTY - \$1 - ZIP TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZI2 THILE DELETE 4.1 THLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C!TY - ST - ZIF TELE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CHY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

6/6/96 (305) 386-1236