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Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # M50648 (8)

1. Corporation Name
MATRAIL CORPORATION

Principal Place of Business
% STEVEN H. HAGEN, ESQ.
701 BRICKELL AVENUE, SUITE 3000
MIAMI FL 33131
US

Mailing Address
% STEVEN H. HAGEN, ESQ.
701 BRICKELL AVENUE, SUITE 3000
MIAMI FL 33131-2847
US



2. Principal Place of Business

21 State Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified
04/21/1987

3a. Date of Last Report
08/27/1996

4. FET Number
59-2823464

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

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVENUE
SUITE 3000
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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, principal 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 understand with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

DATE

12. OFFICERS AND DIRECTORS

1. TITLE D
NAME MCALLISTER, ALVARO
STREET ADDRESS 1925 BRICKELL AVE. #D1108
CITY, ST, ZIP MIAMI FL
TITLE VPD
NAME MCALLISTER, CARLOS
STREET ADDRESS 1925 BRICKELL AV #D1108
CITY, ST, ZIP MIAMI FL
TITLE D
NAME DE GUTIERREZ, SYLVIA
STREET ADDRESS 1925 BRICKELL AV #D1108
CITY, ST, ZIP MIAMI FL
TITLE S
NAME HAGEN, STEVEN H
STREET ADDRESS 701 BRICKELL AVENUE., STE 3000
CITY, ST, ZIP MIAMI FL 33131
TITLE D
NAME DE RODRIGUEZ, JUANA
STREET ADDRESS 1925 BRICKELL AV #D1108
CITY, ST, ZIP MIAMI FL
TITLE D
NAME MCALLISTER, ROBERTO
STREET ADDRESS 1925 BRICKELL AVE., #D1108
CITY, ST, ZIP MIAMI FL

☐ DELETE

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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 does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the
information contained 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 a full or partial 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 on Block 12 or Block 13 or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 27/97

Display Form #

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