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

APPROVED AND FILED

95 MAY -1 AM 8:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **293084** **(0)**

1. Corporation Name
GULMA WHOLESALE, INC.

Principal Place of Business
2345 N W 21 TERR
MIAMI FL 33142

Mailing Address
2345 N W 21 TERR
MIAMI FL 33142

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **05/19/1965**
3a. Date of Last Report: **01/24/1994**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27
City & State — 23
City & State — 28
24 25 29 30

4. FEI Number: **59-1098004** — Applied For / Not Applicable

5. Certificate of Status Desired: [X] **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: [ ] **$5.00** May Be Added to Fees

8. Does corporation qualify for intangible tax under s. 199.032, Florida Statutes? [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
GARCIA, JORGE M.
2150 NW 9TH ST.(OFFICE)
MIAMI FL 33125

10. Name and Address of New Registered Agent
81 Name: GARCIA, JORGE M
82 Street Address (P.O. Box Number is Not Acceptable): 2150 N.W. 9 st.
83
84 City: MIAMI FL 85 Zip Code: 33125

11. Pursuant to the provisions of Sections 607.0505 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: GARCIA, JORGE M. — 1/11/95
(Registered Agent's Signature) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS	
TITLE	P	TITLE	[ ] Change [ ] Addition
NAME	GARCIA, JORGE M	NAME	
STREET ADDRESS	2150 NW 9TH ST.	STREET ADDRESS	
CITY ST ZIP	MIAMI, FL 00000	CITY ST ZIP	MIAMI - FL 33125
TITLE	V	TITLE	[ ] Change [ ] Addition
NAME	MONTEJO, MAURICIO	NAME	
STREET ADDRESS	6520 S.W. 17TH STREET	STREET ADDRESS	
CITY ST ZIP	MIAMI FL	CITY ST ZIP	MIAMI - FL 33155
TITLE	T	TITLE	[ ] Change [ ] Addition
NAME	OLLET, JULIO	NAME	
STREET ADDRESS	1015 S.W. 88TH AVENUE	STREET ADDRESS	
CITY ST ZIP	MIAMI FL	CITY ST ZIP	
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY ST ZIP		CITY ST ZIP	
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY ST ZIP		CITY ST ZIP	
TITLE		TITLE	[ ] Change [ ] Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY ST ZIP		CITY ST ZIP	

14. I hereby certify that the information supplied with this filing, and accompanying fee is accurate and that such information complies with the requirements of Section 607.0505, 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 registered agent, or a person authorized to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: 1/11/95 — 638-1756
(Date) (Daytime Phone)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
MAURICIO F. MONTEJO

0183062 CP