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95 MAY -1 PM 3: 11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # 308057 (9)

1. Corporation Name
MIGUEL CHINCHILLA VARONA AND ASSOC., INC.

Principal Place of Business Mailing Address

3850 20TH STREET N/A
SUITE 400 P.O. BOX 0
VERO BEACH FL 32960-2472 VERO BEACH FL 32961
US US

3. Date Incorporated or Qualified 08/10/1966 3a. Date of Last Report 06/21/1994

4. FEI Number 59-1148266 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

7. This corporation has liability for internal tax for months 1-100 0/92 Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21 26

22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.

23 City & State 28 City & State

24 Zip Country 29 Zip Country 30

9. Name and Address of Current Registered Agent

PRIETO, JUAN
4510 ROSEWOOD
VERO BCH FL 32966

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.07 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: *Juan R* DATE: 4/28/95

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---------------------|---|---|
| TITLE | TPD | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | PRIETO, JUAN | 1.2 NAME | |
| STREET ADDRESS | 4510 ROSEWOOD | 1.3 STREET ADDRESS | |
| CITY ST ZIP | VERO BCH FL | 1.4 CITY ST ZIP | |
| TITLE | VD | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | PRIETO, JOSE A. | 2.2 NAME | |
| STREET ADDRESS | 4510 ROSEWOOD | 2.3 STREET ADDRESS | |
| CITY ST ZIP | VERO BCH FL | 2.4 CITY ST ZIP | |
| TITLE | V | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | PRIETO, CARMEN | 3.2 NAME | |
| STREET ADDRESS | 4510 ROSEWOOD | 3.3 STREET ADDRESS | |
| CITY ST ZIP | VERO BCH FL | 3.4 CITY ST ZIP | |
| TITLE | V | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | PRIETO, FRANCISCO R | 4.2 NAME | |
| STREET ADDRESS | 7524 MUTINY AVE | 4.3 STREET ADDRESS | |
| CITY ST ZIP | MIAMI BCH FL | 4.4 CITY ST ZIP | |
| TITLE | | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY ST ZIP | | 5.4 CITY ST ZIP | |
| TITLE | | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 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 110.07(9)(b), 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 13 or Block 13 if changed; or in an attachment with an address.

SIGNATURE: *Jose A. Prieto* DATE: 2/28/95 407 567 5113

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR