FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 311749

(6)

MININGTEX, INC.

Principal Place of Business Mailing Address

Country

10808 AVENIDA SANTA ANA BOCA RATON FL 33498-6768

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

10808 AVENIDA SANTA ANA BOCA RATON FL 33498-6768

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

FILED Apr 28 1997 8:00am Secretary of State



8. This corporation has liability for intangible tax under s. 199.032,

3. Date Incorporated or Qualified

12/13/1966

59-1199381

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

3a. Date of Last Report

Applied For

\$8.75 Additional

Fee Required

\$5,00 May Be

Added to Fees

Not Applicable

07/08/1996

24	25	29	30)			Florida Statutes	L_		J No	
	9. Name and Address of Current F	81			10. Name and Address	of New Regi	etered A	gent			
GREATON, JR., WILSON						ame					•
2601 E OAKLAND PARK BLVD #4 05 FT. LAUDERDALE FL 33306					St	reet Addres	s (P.O. Box Number is No	t Acceptable)		
						~				 _	
				83	l						}
				84	Ci	itv	<u> </u>			85 Zip (Code
					L	<u> </u>			FL		
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. I hereby accept the appointment as 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 Signature: typed of printed name of registered agent and title III applicable. (NOTE: Registered Agent signature required when reinstalling). DATE											
	Signature, typed or printed name of registered agent a			d Age	nl sig	nature required			DATE		
12.	OFFICERS AND I	DIRECTORS	13.				ADDITIONS/CHANGES	TO OFFICE			
TITLE	PD	☐ DETE IF	1.11							Change	Addition
NAME	DE BOADA, EMILA		1.2 N	AME							1
STREET AODRESS	10808 AVENIDA SANTA ANA		138	TREET	ADDF	RESS					
CITY - ST - ZIP	BOCA RATON FL			ITY-S	T-ZIP	,	,				
TITLE	DV	DELETE	2.1 7	ITLE						☐ Change	Addition
NAME	DE NARVAEZ, PABLO	2.2]
STREET ADORESS	10808 AVENIDA SANTA ANA			2.3 STREET ADDRESS							ļ
City-St-ZiF	BOCA RATON FL		2 41	CITY-S	ST - ZI	Р					
TITLE	SD	☐ DELETE	31T	ITLE					- "	☐ Change	Addition
NAME	DE NARVAEZ, CECILIA		3.2 N	IAME		j					ļ
STREET ADDRESS				3.3 STREET ADDRESS							l
CHY-ST-ZiP	BOCA RATON FL			3.4. CITY-ST-ZIP							
TITLE	T	☐ DELETE	4.1 T	ITLE						Change	☐ Addition
NAME	DE BOADA, EMILA		4.21	NAME							1
STREET ADDRESS	10808 AVENIDA SANTA ANA		435	TREET	ADDF	RESS					1
CITY-S1-7IF	BOCA RATON FL [44			HTY-\$1	T-ZIP	,					ſ
TOTALE		☐ DELETE	5.1 1	ITLE						Change	Addition
NAME			5.2 N	IAME							
STREET ADDRESS			5.3 S	TREET	ADDF	RESS					Í
CITY-ST-ZIF			5.4 0	ITY-ST	7-ZIP	, <u> </u>					}
Title		DELETE	6.1 T	ITLE						Change	Addition
NAME			6.2 N	IAME							1
STREET ADDRESS			6.3 5	TREET	ADDI	RESS					}
DITY-ST-ZIP			6.40	ITY-SI	T-ZIF	,					
14. I do hereb	by certify that the information supplied v	ith this filing does not qua	lify for the	exe	mpt	ion stated in	Section 119.07(3)(i), Flor	ida Statutes	I further	certify that	the
to the sabout about a total land a man and a much light a witness in the deput of the control of the sabout a s											
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 Flock 13 if changed, or on an attachment with an address.											

Country