

DOCUMENT # 337498

(0)

1. Corporation Name

LA ESPONOLA PRODUCTS INC

Principal Place of Business

928 N W 7TH AVENUE
MIAMI FL 33136

Mailing Address

928 N W 7TH AVENUE
MIAMI FL 33136

FILED

Aug 14 1996 8:00 am
Secretary of State

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. Filing Number

59-1221297

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

ALVAREZ, FAUSTO
2828 CORAL - WAY SUITE #410
MIAMI FL 33145

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 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 of officer or printed name of registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

8/15/96

12. OFFICERS AND DIRECTORS

TITLE

PO

☐ DELETE

NAME

CASASUS, JOSE RAMON

STREET ADDRESS

3895 SW 68 AVE

CITY - ST - ZIP

MIAMI FL

TITLE

D

☒ DELETE

NAME

CASASUS, EMMA

STREET ADDRESS

3895 SW 68 AVE

CITY - ST - ZIP

MIAMI FL

TITLE

DV

☐ DELETE

NAME

GRABIEL, ARTURO

STREET ADDRESS

3138 SW 22 TERR.

CITY - ST - ZIP

MIAMI FL

TITLE

D

☒ DELETE

NAME

GRABIEL, ISABEL

STREET ADDRESS

3138 SW 22 TERR.

CITY - ST - ZIP

MIAMI FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

14 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☐ Addition☐ Change ☒ Addition☐ Change ☐ Addition☐ Change ☐ Addition

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)(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. This filing is for the 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 it is an original or a true and correct copy of the original, or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/15/96

0070401 CP

CR20034 (3/96)