

FILE NOW: FILING FEE AFTER MAY 1 IS \$25.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 397992 (9)

1. Corporation Name

BANKEST INTERNATIONAL, INC

FILED
Apr 01, 1996 08:00 AM
Secretary of State



Principal Place of Business

1395 BRICKELL AVE
7 FL
MIAMI FL 33131
US

Mailing Address

1395 BRICKELL AVENUE
7TH FLOOR
MIAMI FL 33131
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

VALDES-FAULI, RAUL
3400 ONE BISCAYNE TOWER
2 SOUTH BISCAYNE BLVD.
MIAMI FL 33131

3. Date Incorporated or Qualified

03/23/1972

3a. Date of Last Report

03/27/1995

4. FET Number

58-1383879

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

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

33131

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent or officer of corporation

Signature, typed or printed name of new registered agent

Date

12. OFFICERS AND DIRECTORS

TITLE PD ORLANSKY, EDUARDO ☐ DELETE

NAME ORLANSKY, EDUARDO
STREET ADDRESS 881 OCEAN DR. KEY BSCYNE
CITY- ST- ZIP MIAMI FLORIDA

TITLE SD ORLANSKY, HECTOR (ASST) ☐ DELETE

NAME ORLANSKY, HECTOR (ASST)
STREET ADDRESS 881 OCEAN DR. KEY BSCYNE
CITY- ST- ZIP MIAMI FLORIDA

TITLE VD STANHAM, PETER ☐ DELETE

NAME STANHAM, PETER
STREET ADDRESS 11300 S.W. 67TH AVENUE
CITY- ST- ZIP MIAMI FLORIDA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY- ST- ZIP

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

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

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-04/01/96--01109--019
***200.00

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)(c), 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 Block 13, changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Phone #

CR2E034 (12/95)