FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

DOCUMENT # 409105 (4)

1. Corporate Name
PROPERTY MANAGEMENT & MAINTENANCE, INC.

APPROVED AND FILED

95 MAY -1 AM 11:39

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
3225 BIRD AVENUE MIAMI FL 33133	3225 BIRD AVENUE MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/19/1972

3a. Date of Last Report: 05/01/1994

4. FEI Number: 59-1418616 ☐ 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. Does corporation owe any back taxes under s. 220.02 Florida Statutes? ☐ Yes ☐ No

2. Principal Place of Business
21 6700 S.W. 21 ST.
22 Suite, Apt. # or P.O. Box
23 City & State: MIAMI, FL.
24 Zip: 33155 25 Country

2a. Mailing Address
26 6700 S.W.21 ST.
27 Suite, Apt. # or P.O. Box
28 City & State: MIAMI, FL.
29 Zip: 33155 30 Country

9. Name and Address of Current Registered Agent

INFANTE, JOSE RENE
6700 SW 21ST ST
MIAMI FL 33155

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 Section(s) 607.1005, and/or 1009, 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 607.325, Florida Statutes.

SIGNATURE

12. OFFICER AND DIRECTOR	13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
TITLE: P NAME: INFANTE, JOSE MIGUEL STREET ADDRESS: 3225 BIRD AVE CITY-ST-ZIP: MIAMI, FL 00000	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

14. I declare I certify that the information supplied with this filing is, effective, furnished and does not qualify for the exemptions stated in Section 119.07(3)(i), Florida Statutes. I further certify that the profit or not-for-profit corporation 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 with an address.

SIGNATURE: X Joe M Infante 5/1/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

0136074 CP