

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

* CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murray
Secretary of State
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
AND
FILED

55 MAY -1 AM 4:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # **448189** (1)
1. Corporation Name
POAS DEVELOPMENT INC.

Principal Place of Business: **2 S. BISCAYNE BLVD. 3400 ONE BISCAYNE TOWER MIAMI FL 33131**
Mailing Address: **2 S. BISCAYNE BLVD. 3400 ONE BISCAYNE TOWER MIAMI FL 33131**

3. Date of Incorporation or Creation: **04/18/1974** 3a. Date of Last Report: **05/01/1994**
4. FEI Number: **65-0141801** 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 intangible tax under s. 198.037, Florida Statutes: Yes No

2. Principal Place of Business: **21** 2a. Mailing Address: **26**
3. City & State: **22** 3a. City & State: **27**
4. City: **23** 4a. City: **28**
5. County: **24** 5a. County: **29** 6. ZIP: **30**

9. Name and Address of Current Registered Agent
**VALDES-FAULI CORPORATE SERVICES INC
2 S. BISCAYNE BLVD.
3400 ONE BISCAYNE TOWER
MIAMI FL 33131**

10. Name and Address of New Registered Agent
81. Name: _____
82. Street Address (if O. Box Number is Not Acceptable): _____
83. _____
84. City: _____ FL 85. Zip Code: _____

11. Pursuant to the provisions of Sections 607.01(2) and 607.15(1), 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, thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.05(5), Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

OFFICER	NAME	STREET ADDRESS	CITY & STATE
PD	TOWNSON, ERNESTO	2 S BISCAYNE BLVD #3400 MIAMI FL	
SD	TOWNSON, GERARDO	2 S BISCAYNE BLVD #3400 MIAMI FL	
TD	MCDONALD, SONIA RINCON	2 S BISCAYNE BLVD #3400 MIAMI FL	
D	DE FERNANDEZ, LILLIAN	2 S BISCAYNE BLVD #3400 MIAMI FL	
D	DE MNI, AYLEEN TOWNSON	2 S BISCAYNE BLVD #3400 MIAMI FL	

13. ADDITIONS, CHANGES, TO OFFICERS AND DIRECTORS IN 12.

OFFICER	NAME	STREET ADDRESS	CITY & STATE	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.071(1)(b), Florida Statutes. I further certify that the information is also being furnished to the annual report or supplemental annual report as 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 agent or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or 13 of this report, or on an attachment with an affidavit.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/95