

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra H. Armstrong
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 456206

(2)

1. Corporation Name

CENA CORPORATION

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JAN 19 AM 9:43

Principal Place of Business

**7140 SW 8 ST.
MIAMI FLORIDA 33144**

Mailing Address

**7140 SW 8 ST.
MIAMI FLORIDA 33144**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

08/09/1974

3a. Date of Last Report

04/14/1994

2. Principal Place of Business

2a. Mailing Address

21	26	4. FEI Number	Applied For
State, Apt. # etc.	State, Apt. # etc.	59-1547059	Not Applicable
22	27	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		
23	28	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country
24	25	29	30

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**FERNANDEZ, ENRIQUE
2471 S.W. 32ND AVENUE
MIAMI FLORIDA 33145**

10. Name and Address of New Registered Agent

01	Name
02	Street Address (P.O. Box Number is Not Acceptable)
03	
04	City
FL	05 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, typed or printed name of registered agent and title of agent

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	FERNANDEZ, ENRIQUE	1.2 NAME	
STREET ADDRESS	3051 S.W. 21 TERRACE	1.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	1.4 CITY, ST, ZIP	
TITLE	SD	2.1 TITLE	☐ Change ☐ Addition
NAME	FERNANDEZ, AURORA	2.2 NAME	
STREET ADDRESS	3051 SW 21 TERR	2.3 STREET ADDRESS	
CITY, ST, ZIP	MIAMI FL	2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information furnished with this filing is voluntarily furnished and I do not qualify for the exemption stated in Law 1991-17, Chapter 1, Florida Statutes. I further certify that this information is accurate on this annual report or supplemental annual report as filed and is complete 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 registered agent or trustee empowered to execute this report as required by Chapter 142, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ENRIQUE FERNANDEZ

President

1/15/95

505-262-6910