FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 07 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # 486659

(6)

Corporation CORVO, Principal Place	INC.	Mailing Address			
8701 NORTHWEST 32ND AVENUE 8701 NORTHWEST 32ND AVI MIAMI FL 33147-3705 MIAMI FL 33147-3705			ENUE		
				3. Date Incorporated or Qualified 10/27/1975	3a. Date of Last Report 04/23/1996
─ 1 '	ace of Business	2a. Mailing Address		4. FEI Number 59-1631258	Applied For
Suite, Apt	#. etc.	26 Suite, Apt. #, etc.		38 103 1230	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	?	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country 25	Zip	Country	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes \[\] No
24	9. Name and Address of Curren	29 3 It Registered Agent	0	10, Name and Address of New Reg	
COR	IVO, MARIO		81 Name M	ARIO RAUL CORVI	
ARROW MODEL NAME OF ARROW OFFICE				ess (P.O. Box Number is Not Acceptable)	
MIAMI FL			87	101 N.W. 32 AUE	NUE
			B3 1	IAHI	
			84 City		FI 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508. Florida Statutes	the above-named corp	oration submits this statement for the o	urpose of changing its registered
office or re	egistered agent, or both, in the State	of forida. Such change was au	thorized by the corporati	oration submits this statement for the proof on's board of directors. I hereby accep	t the appointment as registered
		A And	ua Statules.	1	29/97
SIGNATURE	Syfe My And or printed name of registries age	of and offert applicable (NOTE	Flegistered Agent signature require	d when reinstating)	DATE
12.	OFFICERS AND		13,	ADDITIONS/CHANGES TO OFFIC	
THILE	CORVO, MARIA	DELETE	1.1 TITLE		Change Addition
NAME PROFEET ADDRESSES	3300 NW 83RD STREET		1.2 NAME		
STREET ADDRESS City-St-Zip	MIAMI FL		1.3 STREET ADDRESS : 1.4 CITY-ST-ZIP		
TITLE	PS	☐ DEŁETE	2.1 TITLE		Change Addition
NAM9	CORVO, MARIO RAUL		2.2 NAME		
STREET ADDRESS	3300 NW 83RD STREET		2.3 STREET ADDRESS	1	
City - St - ZiP	MIAMI FL		2. 4 CITY-ST-ZIP	·•*	
TritLE		[] DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS City-St-7IP			3.3 STREET ADDRESS		
TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - 7IP	47.177		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		·
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - SI - ZIP TITLE	·	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAMÉ		- pecere	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - S1 - ZIP			6.4 CITY-ST-ZIP		
14 Lda barak	by certify that the information supplied in indicated on this annual report or s flicer or director of the corporation or in Block 12 or Block 18 if changed, or	d with this filing does not qualify uppremental annual report is tru the receiver or flustee empowe on an attagreent with an addre	for the exemption stated	in Section 119.07(3)(i), Florida Statutes my signature shall have the same legal as required by Chapter 607, Florida S	i. I further certify that the effect as if made under oath; that atules; and that my name