PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

494264

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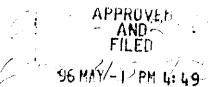
## **CUQUITO STORE CORPORATION**

1036 S.W. 1 ST.

Principal Place of Business

Maling Address

1036 S.W. 1 ST. MIAMI FL 33130



SECRETARY OF STATE TALLAHASSEE. FLORIDA



			MINMITE SOLOU				1				
							3. Date Incorporated or Qu	alified	3a. Date	of Last F	leport
	75.00.00.00.00.00.00.00.00.00.00.00.00.00	· · · · · · · · · · · · · · · · · · ·					01/29/1976		(	)4/28/1	1995
Principal Place of Business     2300 CORAL WAY			2a. Mailing Address				4. FEI Number				Applied For
		26	2300 COR		<i></i>		59-1682841				Not Applicable
Suite, Apt. #, etc.			Suite, Apt #, etc.				5. Certificate of Status Desired Security Securi				
City & State			Orty & State				6. Election Campaign Finan	ncing		\$5.0	<b>0</b> May Be
	FLORIDA,	28	MIAMI FL				Trust Fund Contribution				d to Fees
Zφ 24 33145	Country		Zip		buntry		8. This corporation has liab			cunder s	199.032,
24 33145	25 US. 9. Name and Address of Curre	29	33145	30	US.		1	Yes Yes			
	5. Name and Address of Cone	nt negis	reien Agent		81	Nanie	10. Name and Address of	New He	igistered A	gent	
EL GRID L'AMBURAL REDONNE ARRIVAGE MA						FLORID	A ANNUAL REPORT	SERV	/ICES,	INC.	
FLORIDA ANNUAL REPORT SERVICES INC					82 Street Address (F.O. Box Number is Not Acceptable) 2300 CORAL WAY SUITE # 200						
1036 S.W. 1 ST.					83	2300 0	OKAL WAI SUITE	# 200	,	<del></del>	
MAMI	rL										
					84	City			F-1		p Code
11. Pursuant to	the provisions of Sections 607 050	2 and 60	7 1508. Florida Sta	futes the at	1000 p. p.a.	MIAMI	ion cultivate this etaken ant for	tho p w	<u> </u>	anima ita	3145
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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE	Signature its sed or printed name of my storen ager	tandom ma	d. a. c.lather			TERA LO	PEZ.PRES		DATE		
12.	OFFICERS AN	NO DIREC		13			ADDITIONS/CHANGES T	O OFFIC	ERS AND	DIRECTO	ORS IN 12
TITLE	PD		☐ DELFTE	1 1	TIFLE					) Change	Addition
NAME	PRIETO, ROSAURA			12	NAME:						
STREET ADDRESS	3030 N.W. 26TH ST.			1.3	STREET AC	ODRESS					
CITY - ST - ZIF	MIAMI FL			1,4	City-St-	ZIP					
THTLE	DT		DELETE.	2 1	TITLE					Change	Addition
NAME	LOZANO, BARBARA B.			22	NAME		<u> </u>	HHH	11 1 1 1	3 I:	in the state of
STREET ADDRESS	3032 N.W. 26TH ST.			23	STHEET AC	ODRESS			3601		
CITY-SI-ZIF	MIAMI FL			24	CITY - SI	Zif	<b>河:</b> 奔:	ヤキとりし	0.00	李本本市之	100.00
TITLE	P		☐ DELF 1E	3 1	THLE					] Change	☐ Addition
NAME	Lazaro, martinez			32	NAME						.
STREET ADDRESS	3032 NW 26TH STREET			33	STREET A	ODRESS					
CITY - ST - ZIF	MIAMI FL			3.4	City-St-,	ZIP					
TITLE			DELETE TE	4.1	TIT,E			,		Change	Addition
NAMĘ				4.21	NAME						
STREET ADDRESS				43	STREET AD	DORESS					
CITY - ST - ZIF				4.4	CITY - \$1 - 2	ZIP					
TITLE			DELETE	5.7	THLE					Change	Addition
NAME				52	NAME		N n . 1				
STREET ADDRESS				53	STHEET AD	)DRESS	V0511				İ
CITY-ST-ZIF			·· - ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··	5.41	CITY - ST - Z	ZIP	Derail 1				
TITLE			☐ DELFI€	6 1	HILLE .		1			Change	Addition
NAME				6.2	NAME						
STREET ADDRESS				63	STREET AD	DDRESS					
CITY-ST-ZIF				6.4	CHY ST-Z	ZIP	·				

I. 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)(k). 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 13 if changed, or on an attachment with an address.

SIGNATURE: 4

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96 William Marie

CR2E034 (12/95)