

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **546194** (2)

1. Corporation Name

**G.A.M. ROBERT ELECTRONIC & APPLIANCES CORPORATIO
N**



Principal Place of Business

Mailing Address

8550 W FLAGLER ST #111
% BART C VIDAL
MIAMI FL 33144

8550 W FLAGLER ST #111
% BART C VIDAL
MIAMI FL 33144

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified

08/01/1977

3a. Date of Last Report

05/01/1995

4. F.I.T. Number

59-1782019

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MENESINI, GUIDO GUERRA
8550 W FLAGLER ST #111
MIAMI FL 33144**

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 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 in block, in full, and dated (see instructions)

NOTE: By signing this signature, you are certifying that you are the person named in the signature.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME **PD MENESINI, GUERRA GUIDO**
STREET ADDRESS **950 MOCKINGBIRD LANE**
CITY- ST- ZIP **PLANTATION FL**

1 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

TITLE DELETE
NAME **SD MENESINI, GUERRA ALMA**
STREET ADDRESS **950 MOCKINGBIRD LANE**
CITY- ST- ZIP **PLANTATION FL**

2 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

3 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

4 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

5 TITLE Change Addition
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

6 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

14. 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 a 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 if changed by an attachment with an address.

SIGNATURE:

GUIDO GUERRA MENESINI 4/22/96

305/944-2143

SIGNATURE AND TYPE IN BLOCK PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)