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 # **546478** **(9)**

1. Corporation Name

ALMAR INTERNATIONAL CORP.

Principal Place of Business	Mailing Address
7300 N.W. 35TH TERRACE P.O. BOX 522518 MIAMI FL 33152	7300 N.W. 35TH TERRACE P.O. BOX 522518 MIAMI FL 33152

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 / County 25	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 / County 30

3. Date Incorporated or Qualified: **08/10/1977**

3a. Date of Last Report: **02/10/1995**

4. FEI Number: **59-1761496** ☐ 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

MARINO, ALBERTO J.
7300 N.W. 35TH TERRACE
MIAMI FL 33122

10. Name and Address of New Registered Agent

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 Section 617.1905, and 617.1906, 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 617.0501, Florida Statutes.

SIGNATURE (Date)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	☐ DELETE	1 TITLE	☐ Change ☐ Addition
NAME	MARINO, ALBERTO J.		2 NAME	
STREET ADDRESS	7300 NW 35TH TERR.		3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		4 CITY-ST-ZIP	
TITLE	S	☐ DELETE	5 TITLE	☐ Change ☐ Addition
NAME	MARINO, IVETTE C.		6 NAME	
STREET ADDRESS	7300 NW 35TH TERR.		7 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		8 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	9 TITLE	☐ Change ☐ Addition
NAME	MARINO, JR. ALBERTO J		10 NAME	
STREET ADDRESS	7300 NW 35TH TERR.		11 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		12 CITY-ST-ZIP	
TITLE		☐ DELETE	13 TITLE	☐ Change ☐ Addition
NAME			14 NAME	
STREET ADDRESS			15 STREET ADDRESS	
CITY-ST-ZIP			16 CITY-ST-ZIP	
TITLE		☐ DELETE	17 TITLE	☐ Change ☐ Addition
NAME			18 NAME	
STREET ADDRESS			19 STREET ADDRESS	
CITY-ST-ZIP			20 CITY-ST-ZIP	
TITLE		☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME			22 NAME	
STREET ADDRESS			23 STREET ADDRESS	
CITY-ST-ZIP			24 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this report is true, complete and accurate, and that this report does not amend, for the purpose of Section 119.07(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental attachment to 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 12 or Block 13 above with an asterisk (*) or attached with an asterisk.

SIGNATURE: ALBERTO J. MARINO 4-16-96 (305) 594-7100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Telephone Number)

CR2E034 (12/95)