

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 # 582145 (9)

1. Corporation Name

URBATRON, INC.

Principal Place of Business

511 S.W. 21ST ROAD
MIAMI FL 33129

Mailing Address

511 S.W. 21ST ROAD
MIAMI FL 33129 - 1333



3. Date Incorporated or Qualified

07/26/1978

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2340033

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

2. Principal Place of Business

2a. Mailing Address

21 2618 GALLAND ST.

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 CORAL GABLES, FL

27

City & State

City & State

23

Zip

Country

28

Zip

Country

24 33134-6113

25

USA

29

Zip

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEOPOLDO FLOREZ
511 S.W. 21ST ROAD
MIAMI FL 33129 - 1333

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 name of registered agent and date if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ DELETE

☐ Change

☐ Addition

TITLE

PD

NAME

FLOREZ, LEOPOLDO

STREET ADDRESS

511 SW 21ST ROAD

CITY - ST - ZIP

MIAMI FL 33129-1333

TITLE

ST

NAME

FLOREZ, LEOPOLDO

STREET ADDRESS

511 SW 21ST ROAD

CITY - ST - ZIP

MIAMI FL 33129-1333

TITLE

~~V~~

NAME

~~GARRAQUA, FELIX J.~~

STREET ADDRESS

~~1243 S.W. 21ST STREET~~

CITY - ST - ZIP

~~MIAMI FL~~

TITLE

~~V~~

NAME

~~FLOREZ, LEOPOLDO~~

STREET ADDRESS

~~511 SW 21ST ROAD~~

CITY - ST - ZIP

~~MIAMI, FL 33129-1333~~

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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☐ DELETE

NAME

STREET ADDRESS

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)(g), 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

LEOPOLDO FLOREZ

3/13/96 (705) 442-4554

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Office Phone #

CR2E034 (12/95)