

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

**PROFIT CORPORATION ANNUAL REPORT 1996**



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

**DOCUMENT # 617998 (0)**

1. Corporation Name  
**THE RELATED COMPANIES OF FLORIDA, INC.**



Principal Place of Business: **2828 CORAL WAY PENTHOUSE SUITE 1 MIAMI FL 33145**  
Mailing Address: **2828 CORAL WAY PENTHOUSE SUITE 1 MIAMI FL 33145**

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

3. Date Incorporated or Qualified: **04/19/1979** 3a. Date of Last Report: **03/31/1995**  
4. FEI Number: **59-1915173** 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**

**PEREZ, JORGE M.  
2100 CORAL WAY, PH-1  
MIAMI FL 33145**

**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 Sections 607.0602 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 607.0604, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: <b>PD</b>	NAME: <b>PEREZ, JORGE M.</b>	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>2828 CORAL WAY</b>	CITY-STATE-ZIP: <b>MIAMI, FL 33145</b>	2. NAME	
TITLE: <b>VDS</b>	NAME: <b>ROSS, STEPHEN M.</b>	3. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>625 MADISON AVENUE</b>	CITY-STATE-ZIP: <b>NEW YORK NY</b>	4. CITY-STATE-ZIP	
TITLE: <b>V</b>	NAME: <b>ALVAREZ, MARCELO A.</b>	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>2828 CORAL WAY</b>	CITY-STATE-ZIP: <b>MIAMI FL</b>	6. NAME	
TITLE: <b>AS</b>	NAME: <b>HERNANDEZ, ANGEL</b>	7. STREET ADDRESS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>2828 CORAL WAY-PH</b>	CITY-STATE-ZIP: <b>MIAMI FL</b>	8. CITY-STATE-ZIP	
TITLE: <b>V</b>	NAME: <b>ROCHA, ROBERTO</b>	9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>2828 CORAL WAY</b>	CITY-STATE-ZIP: <b>MIAMI FL</b>	10. NAME	
TITLE: <b>V</b>	NAME: <b>HAMMON, MICHAEL</b>	11. STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: <b>2828 CORAL WAY</b>	CITY-STATE-ZIP: <b>MIAMI FL</b>	12. CITY-STATE-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 officer 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 attached or with an affidavit.

SIGNATURE: *Marcelo Alvarez* **MARCELO A. ALVAREZ** 3/15/96 (305) 460 9900  
Vice President

CR2E034 (12/95)