

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

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 665327 (3)
1. Corporation Name
IVETTE ARANGO INTERIORS, INC.



Principal Place of Business: **71 NE 40TH ST. P.O. BOX 370217 MIAMI FL 33137**
Mailing Address: **71 NE 40TH ST. P.O. BOX 370217 MIAMI FL 33137**

3. Date Incorporated or Qualified: **04/01/1980** 3a. Date of Last Report: **05/01/1995**
4. FEI Number: **65-0102474** 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: 21 State, Apt. #, etc.: 22 City & State: 23 Zip: Country: 24
2a. Mailing Address: 26 Suite, Apt. #, etc.: 27 City & State: 28 Zip: Country: 29

9. Name and Address of Current Registered Agent

**BORRON, JORGE C ESQ
2151 SW LE JEUNE ROAD, #202
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name: 82 Street Address (P.O. Box Number is Not Acceptable): 83 City: 84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0507 and 607.1505, 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 of the individual who is the registered agent of the corporation

Signature of the Agent Signature required when removing

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.1 TITLE: **P** DELETE
NAME: **PLANAS, IVETTE**
STREET ADDRESS: **71 NE 40TH ST.**
CITY, ST, ZIP: **MIAMI FL**
12.2 TITLE: DELETE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
12.3 TITLE: DELETE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
12.4 TITLE: DELETE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:
12.5 TITLE: DELETE
NAME:
STREET ADDRESS:
CITY, ST, ZIP:

13.1 TITLE: Change Addition
13.2 NAME:
13.3 STREET ADDRESS:
13.4 CITY, ST, ZIP:
13.5 TITLE: Change Addition
13.6 NAME:
13.7 STREET ADDRESS:
13.8 CITY, ST, ZIP:
13.9 TITLE: Change Addition
13.10 NAME:
13.11 STREET ADDRESS:
13.12 CITY, ST, ZIP:
13.13 TITLE: Change Addition
13.14 NAME:
13.15 STREET ADDRESS:
13.16 CITY, ST, ZIP:
13.17 TITLE: Change Addition
13.18 NAME:
13.19 STREET ADDRESS:
13.20 CITY, ST, ZIP:

14. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, and 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 I personally certify 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 it appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ivette Arango*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/13/96
DATE

Corporate Seal

15034 (12/95)