

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 # 683969 (0)

1. Corporation Name

MIAMI RESTAURANTS REPAIRS, INC.

Principal Place of Business

930 NW 144TH ST
MIAMI FL 33168

Mailing Address

930 NW 144TH ST
MIAMI FL 33168



3. Date Incorporated or Qualified
10/13/1980

3a. Date of Last Report
01/25/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

4. FEI Number

59-2029925

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

GULLO, JOSEPH
930 NW 144TH ST
MIAMI, FL
33168

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 the date of filing.

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

DATE

12.

OFFICERS AND DIRECTORS

DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

TITLE

PD

NAME

GULLO, JOSEPH

STREET ADDRESS

930 N.W. 144TH ST.

CITY - ST - ZIP

MIAMI FL

TITLE

DELETE

1

NAME

11 TITLE

STREET ADDRESS

12 NAME

CITY - ST - ZIP

13 STREET ADDRESS

TITLE

DELETE

14 CITY - ST - ZIP

NAME

21 TITLE

STREET ADDRESS

22 NAME

CITY - ST - ZIP

23 STREET ADDRESS

TITLE

DELETE

24 CITY - ST - ZIP

NAME

31 TITLE

STREET ADDRESS

32 NAME

CITY - ST - ZIP

33 STREET ADDRESS

TITLE

DELETE

34 CITY - ST - ZIP

NAME

41 TITLE

STREET ADDRESS

42 NAME

CITY - ST - ZIP

43 STREET ADDRESS

TITLE

DELETE

44 CITY - ST - ZIP

NAME

51 TITLE

STREET ADDRESS

52 NAME

CITY - ST - ZIP

53 STREET ADDRESS

TITLE

DELETE

54 CITY - ST - ZIP

NAME

61 TITLE

STREET ADDRESS

62 NAME

CITY - ST - ZIP

63 STREET ADDRESS

64 CITY - ST - ZIP

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH GULLO

1/29/96

305-685-6156

CR2E034 (12/95)