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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **684270** **(2)**

1. Corporation Name
DURLAR, INC.

Principal Place of Business
8209 NW 30 TERRACE
P.O.BOX 52-7801 (33152)
MIAMI FL 33122
US

Mailing Address
8209 NW 30 TER
#M
MIAMI FL 33122-1913
US

3. Date Incorporated or Qualified: **08/08/1980**
3a. Date of Last Report: **03/18/1996**

2. Principal Place of Business
21 **732 NW 76th Avenue**
Suite, Apt. #, etc.
22
City & State
23 **Miami,Florida**
Zip 24 **33126** Country 25 **DADE**

2a. Mailing Address
26 **P.O.Box 52-7801**
Suite, Apt. #, etc.
27
City & State
28 **Miami,Florida**
Zip 29 **33152-7801** Country 30 **DADE**

4. FEI Number: **59-2029086** ☐ 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
LARCO, VICTOR M
8209 NWW 30 TERRACE
MIAMI FL 33122

10. Name and Address of New Registered Agent
81 Name: **LARCO, VICTOR M**
82 Street Address (P.O. Box Number is Not Acceptable): **732 N.W. 76th Avenue**
83
84 City: **MIAMI** **FL** 85 Zip Code: **33126**

11. Pursuant to the provisions of Section 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: X _____ (NOTE: Registered Agent signature required when reinstating) DATE: **2/18/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**SD** **ADRIANI, TERESA V** **13225 SW 111 TERRACE** **MIAMI, FL 00000** ☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	**Secretary/Director** **ADRIAN, TERESA V** **13225 SW 111 Terrace** **Miami, Fl. 33186** XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**PD** **LARCO, VICTOR M** **11378 SW 86 LANE** **MIAMI, FL 00000** ☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**D** **DURAND, PAUL M** **YEROVI 177** **LIMA 27 00000** ☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**VP** **MIMBELLA, MARIO** **2055 SW 97 AVE** **MIAMI FL** XX DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	**delete please** ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	**D** **RAMIEREZ, VICTOR** **AVENIDA 11 CALLE 20, APTO. POSTAL 377-1007** **SAN JOSE CO** ☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 added on an attachment with an address.

SIGNATURE: X _____ **2/18/97** **(305)267-0090**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #