

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

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # 693042 (4)

1. Corporation Name
A.V.G. CORPORATION

95 JAN 18 PM 2:41

DO NOT WRITE IN THIS SPACE

Principal Place of Business 11843 SW 49 ST. MIAMI FL 33175	Mailing Address 11843 SW 49 ST. MIAMI FL 33175
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3. Date Incorporated or Qualified 06/30/1981	3a. Date of Last Report 04/28/1994
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2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25

4. FEI Number 59-2219761	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	
GUTIERREZ, ANTONIO V 11843 SW 49TH ST. MIAMI FL 33175	

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 607.0502 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 title if applicable) (NOTE: Registered Agent signature required when transferring) (DATE)

12. OFFICERS AND DIRECTORS	
TITLE	SDT
NAME	GUTIERREZ, MARIELENA
STREET ADDRESS	11843 SW 49TH ST.
CITY, ST, ZIP	MIAMI, FL 00000
TITLE	PDV
NAME	GUTIERREZ, ANTONIO V
STREET ADDRESS	11843 SW 49TH ST.
CITY, ST, ZIP	MIAMI, FL 00000
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	SDT ☒ Change ☐ Addition
12 NAME	ARTEALEJO, MARIELENA
13 STREET ADDRESS	11843 SW 49ST
14 CITY, ST, ZIP	MIAMI FL 33175
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not comply for the exemption stated in Section 119.07(3)(b), 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 as an attachment with an address.

SIGNATURE: *Marileena Artealejo* **MARIELENA ARTEALEJO** 1/11/95 551-0667 (305)
 SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

IN RE: CHANGE OF NAME
OF

Marielena Gutierrez Petitioner(s)

IN THE CIRCUIT COURT OF THE
JUDICIAL CIRCUIT
IN AND FOR DADE
COUNTY, FLORIDA

CIVIL DIVISION

CASE NO. 92-54710

FILED FOR RECORD
92 AUG -3 PM 2:30
CLERK OF CIRCUIT/COUNTY CTS
DADE COUNTY FLORIDA

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FINAL JUDGMENT FOR CHANGE OF NAME (INDIVIDUAL)

This cause was heard on the Petition for Change of Name, and the Court having heard the testimony of the petitioner, and being fully informed in the premises, it is

ADJUDGED that said Petition hereby is granted, and Marielena Gutierrez
hereafter shall be known by the name of Marielena Artealejo
and it is further

ADJUDGED that the Clerk of this Court hereby is directed to report this Final Judgment for Change of Name to the Department of Rehabilitative Services of the State of Florida.

ORDERED at Miami, DADE County,
(City)

Florida this 3rd day of AUGUST, 19 92

STATE OF FLORIDA, COUNTY OF DADE

I HEREBY CERTIFY that the foregoing is a true and correct copy of the original on file in this office.
MARSHALL ADER, CLERK, Circuit and County Courts

Marshall Ader
Deputy Clerk



Bernard S. Shapiro
CIRCUIT JUDGE

JUDGE BERNARD S. SHAPIRO