

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 # 835007 (6)

1. Corporation Name

CAHO CORPORATION



Principal Place of Business

104 ROCKINGHAM COURT
LONGWOOD FL 32779

Mailing Address

104 ROCKINGHAM COURT
LONGWOOD FL 32779

2. Principal Place of Business

21 404 FENWICK COURT

Suite, Apt. #, etc.

City & State

23 DEBARY, FLORIDA

Zip

24 32713

Country

25 USA

2a. Mailing Address

26 P.O. Box 848

Suite, Apt. #, etc.

City & State

28 FLORIDA

Zip

29 32713

Country

30 USA

3. Date Incorporated or Qualified
09/10/1975

3a. Date of Last Report
05/01/1995

4. FEI Number
59-1634286

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

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

ARRECHE, CANDIDO JR.
411 GREYOAK COURT
DEBARY FL 32713

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 and typed or printed name of the person designated as the agent.

(NOTE: Add agent's name and address if the agent is not the corporation's registered office.)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME ARRECHE, OLGA H
STREET ADDRESS 104 ROCKINGHAM COURT
CITY- ST- ZIP LONGWOOD FL

☐ DELETE

TITLE ASD
NAME GORDON, BARBARA
STREET ADDRESS 918 LAKESIDE DRIVE
CITY- ST- ZIP APOPKA FL

☐ DELETE

TITLE VP
NAME ARRECHE, CANDIDO JR
STREET ADDRESS 411 GREYOAK CT
CITY- ST- ZIP DEBARY FL

☐ DELETE

TITLE ST
NAME ARRECHE, JAMES
STREET ADDRESS 104 ROCKINGHAM CT
CITY- ST- ZIP LONGWOOD FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

ARRECHE OLGA H
404 Fenwick Ct
DeBary, FL 32713

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY- ST- ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

☒ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

ARRECHE JAMES
3275-2 South Flowers Rd
Atlanta, GA 30341

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

☐ Change ☐ Addition

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)(k), 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 on an attachment with an address.

SIGNATURE: Olga H. Arreche (OLGA H. ARRECHE) Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/96 (904) 774-9638

CR2E034 (12/95)