FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -2 PM 4:20

DOCUMENT # 851013 (3)

1. Corporation Name
MAJOL INVESTMENT CORPORATION

Principal Place of Business	Mailing Address
11990 SW 41 DRIVE MIAMI FL 33175 US	P.O. BOX 558570 MIAMI FL 33255-8570 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 11/13/1981
3a. Date of Last Report: 01/28/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 98-0062342 ☐ 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

FERRER, JOSE LUIS
11990 SW 41 DRIVE
SUITE B
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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	~~PD~~ PLUTARCO COHEN CAMARANO	1.1 TITLE	PD ☑ Change ☐ Addition
NAME	~~MORALES, MAGDA, MIRNA~~	1.2 NAME	PLUTARCO COHEN CAMARANO
STREET ADDRESS	~~ED BCO CENTRAL PISO #5~~ 48th East Str. Bella Vista	1.3 STREET ADDRESS	48th East St. Bella Vista Sucre Bldg.
CITY-ST-ZIP	PANAMA SUCRE Bldg.	1.4 CITY-ST-ZIP	Panama
TITLE	~~SD~~ ELBA FERNANDEZ DE GARCIA	2.1 TITLE	SD ☑ Change ☐ Addition
NAME	~~PAREDES, GUSTAVO~~	2.2 NAME	ELBA FERNANDEZ DE GARCIA
STREET ADDRESS	~~ED BCO CENTRAL PISO #5~~ 48th East Street Bella Vista	2.3 STREET ADDRESS	48th East St. Bella Vista Sucre Bldg.
CITY-ST-ZIP	~~PANAMA~~ SUCRE BLDG.	2.4 CITY-ST-ZIP	Panama
TITLE	~~TD~~ ANGELA JULIA DE LA ROSA	3.1 TITLE	TD ☑ Change ☐ Addition
NAME	~~DE PAREDES, ELKA~~	3.2 NAME	ANGELA JULIA DE LA ROSA
STREET ADDRESS	~~ED BCO CENTRAL PISO #5~~ 48th East Str. Bella Vista	3.3 STREET ADDRESS	48th East St. Bella Vista Sucre Bldg.
CITY-ST-ZIP	~~PANAMA~~ SUCRE BLDG.	3.4 CITY-ST-ZIP	Panama
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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)(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 hereinabove, or on an attachment with an address.

SIGNATURE: _____ January 12, 1995 (507) 64-1355
Signature and Typed or Printed Name of Individual and Capacity or Title of Authorized Officer or Director — Date — Daytime Phone #

PLUTARCO COHEN CAMARANO, President

0208604 CP