

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 # F15222 (5)

1. Corporation Name

ATEX INTERAMERICA, INC.



Principal Place of Business

1735 N.W. 79TH AVENUE  
MIAMI FL 33126

Mailing Address

1735 N.W. 79TH AVENUE  
MIAMI FL 33126

3. Date Incorporated or Qualified  
01/09/1981

3a. Date of Last Report  
04/07/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2115296

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

City & State

City & State

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

23

28

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

24

Country

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DOBIN, DAVID M.  
4555 ADAMS AVENUE  
MIAMI BEACH FL 33140

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, type or print name of registered agent and fee if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S ☐ DELETE

NAME DOBIN, DAVID M.  
STREET ADDRESS 4555 ADAMS AVE.  
CITY-STATE-ZIP MIAMI BEACH FL

TITLE P ☐ DELETE

NAME PERALTA, JOSE MARIA  
STREET ADDRESS 1735 N.W. 79TH AVENUE  
CITY-STATE-ZIP MIAMI FL

TITLE AS ☐ DELETE

NAME PERALTA, JOSE M.  
STREET ADDRESS 1735 N.W. 79TH AVENUE  
CITY-STATE-ZIP MIAMI FL

TITLE CD ☐ DELETE

NAME DAGLIO, ROBERTO E.  
STREET ADDRESS 1735 N.W. 79TH AVENUE  
CITY-STATE-ZIP MIAMI FL

TITLE AS ☒ DELETE

NAME ~~LENDERBORG, BRIGID~~  
STREET ADDRESS ~~1735 NW 79TH AVE~~  
CITY-STATE-ZIP ~~MIAMI FL~~

TITLE T ☒ DELETE

NAME ~~GRELLMAN, FRANK~~  
STREET ADDRESS 1735 NW 79 AVE  
CITY-STATE-ZIP MIAMI FL

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

DAGLIO, ROBERT JR

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:

Roberto E. Daglio Chairmn. 2/15/96 594-3816

SIGNATURE AND/OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Time Phone #

CR2E034 (12/95)