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 # **F38501** **(5)**

1. Corporation Name

REPREMEX, INC.

Principal Place of Business
6355 NW 36TH STREET
VIRGINIA GARDENS FL 33166-7027

Mailing Address
6355 NW 36TH STREET
VIRGINIA GARDENS FL 33166-7027

2. Principal Place of Business 21 | Suite, Apt. #, etc. 22 | City & State 23 | Zip 24 | Country 25

2a. Mailing Address 26 | Suite, Apt. #, etc. 27 | City & State 28 | Zip 29 | Country 30

3. Date Incorporated or Qualified: 08/06/1981
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-2126932 ☐ 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**

LLERENA, ADA G. ESQ
6355 NW 36TH ST
VIRGINIA GARDENS FL 33166

10. **Name and Address of New Registered Agent**

81 Name: Cristina Gomez
82 Street Address (P.O. Box Number is Not Acceptable): 6355 N.W. 36 Street
83
84 City: Virginia Gardens FL 85 Zip Code: 33166

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] Cristina Gomez, Secretary 3/11/96

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP GONZALEZ-LEWIS, GUSTAVO 6355 NW 36 STR VIRGINIA GDNS FL	XX DELETE	DP Ing. Antonio Garcia 6355 N.W. 36 Street Virginia Gardens, FL 33166	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVE RIBOT, JAVIER TOUSSAINT 6355 NW 36 STR VIRGINIA GDNS FL 33166	XX DELETE		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV FREUDE, MARIO A 6355 NW 36 STR VIRGINIA GDNS FL	XX DELETE		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VF MODIA, CARLOS M 6355 NW 36 STR VIRGINIA GDNS FL	☐ DELETE	DV Carlos M. Modia 6355 N.W. 36 Street Virginia Gardens, FL 33166	XX Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S SPENCER, THOMAS R. JR 801 BRICKELL AVENUE, SUITE 1901 MIAMI FL	XX DELETE	S Cristina Gomez 6355 N.W. 36 Street Virginia Gardens, FL 33166	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS LLERENA, ADA G. ESQ. 6355 NW 36TH STREET VIRGINIA GARDENS FL	XX DELETE		☐ 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: [signature] 3/11/96 305-871-6400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Cristina Gomez, Secretary

CR2E034 (12/95)