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PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-7iP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F47729

1. Corporation Name

(1)

PETE'S ORNAMENTAL IRON SHOP, INC.

Principal Place of Rusiness C/O FLORENCIO PEREZ Mailing Address
C/O FLORENOIO PEREZ 106 SW 57TH AVE 105 SW 57TH AVE MIAMI FL 33144 MIAMI FL 33144-3411 3. Date incorporated or Qualified 3a, Date of Last Report 10/05/1981 06/06/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-2177906 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Ζιρ Country 8. This corporation has liability for intangible tax under s. 199.032. 24 Yes No 25 30 29 Florida Statutes g. Name and Address of Current Registered Agent Name and Address of New Registered Agent PEREZ, FLORENCIO 105 SW 57TH AVE 62 Street MIAMI FL **B3** 84 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 (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) TITLE DELETE 1.1 TITLE PEREZ, ROBERTO NAME 1.2 NAME **3645 SW 5TH TERR** STREET ADORESS 1.3 STREET ADDRESS MIAMI, FL 0 CITY - ST - ZIP 1.4 CITY-ST-ZIP PT DELETE THLE 2.1 TITLE Change Addition PEREZ, FLORENCIO NAM: 2.2 NAME 105 SW 57TH AVE STREET ADDRESS. 2.3 STREET ADDRESS MIAMI, FL 0 City - St - ZiF 2 4 CITY-ST-ZIP THLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CHY - \$1 - 70° 3.4. CiTY+ST-ZiP DELETE THLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS CHY-SI-Z-P 4.4 City-St-ZiP DELETE THLE 51 TITLE Change Addition 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-SI-ZIP 5.4 CITY - ST - ZIP DELETE DICE 6.1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing 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 3 if changed, or on all attachment with an address.