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FILED

Apr 08 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # F94000000205 (4)

1. Corporation Name  
FYFO, INC.



Principal Place of Business

2646 S.W. MAPP RD.  
SUITE 304  
PALM CITY FL 34990

Mailing Address

2646 S.W. MAPP RD.  
SUITE 304  
PALM CITY FL 34990-2758

2. Principal Place of Business

21 15864 W. Hardy

Suite, Apt. #, etc.

22 710

City & State

23 Houston, Texas

Zip

24 77060

Country

25 U.S.A.

2a. Mailing Address

26 15864 W. Hardy

Suite, Apt. #, etc.

27 710

City & State

28 Houston, Texas

Zip

29 77060

Country

30 U.S.A.

3. Date Incorporated or Qualified

01/14/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

74-1837871

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

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE  
NAME VAZQUEZ, JORGE  
STREET ADDRESS 2646 S.W. MAPP RD.  
CITY-ST-ZIP PALM CITY FL 34990

TITLE S ☒ DELETE  
NAME VAZQUEZ, GABRIEL  
STREET ADDRESS 2646 S.W. MAPP RD.  
CITY-ST-ZIP PALM CITY FL 34990

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition  
1.2 NAME Vazquez, Jorge  
1.3 STREET ADDRESS 15864 W. Hardy  
1.4 CITY-ST-ZIP Houston, Texas 77060

2.1 TITLE Secretary ☒ Change ☐ Addition  
2.2 NAME Vazquez, Gabriel  
2.3 STREET ADDRESS 15864 W. Hardy  
2.4 CITY-ST-ZIP Houston, Texas 77060

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
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 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/3/97

281-525-9200

CR2E034 (9/96)