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
1995 AUG -3 AM 9:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F94000002558 (4)**

1. Corporation Name
ZAPATA GROUP SERVICES, INC.

Principal Place of Business	Mailing Address
PH-B 2699 SO. BAYSHORE DRIVE MIAMI FL 33133	PH-B 2699 SO. BAYSHORE DRIVE MIAMI FL 33133

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/17/1994
3a. Date of Last Report:

2. Principal Place of Business
21 2601 SO. BAYSHORE DRIVE
Suite, Apt. #, etc.
22 S-1200
City & State
23 COCONUT GROVE, FL.
Zip 24 33131 Country 25 U.S.A.

2a. Mailing Address
26 2601 SO. BAYSHORE DRIVE
Suite, Apt. #, etc.
27 S-1200
City & State
28 COCONUT GROVE, FL.
Zip 29 33131 Country 30 U.S.A.

4. FEI Number: 65-0470363 ☐ 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

LORENZANA, JORGE E
PH-B
2699 SO. BAYSHORE DRIVE
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name: JORGE LORENZANA
82 Street Address (P.O. Box Number is Not Acceptable): 2601 S. BAYSHORE DRIVE
83 COCONUT GROVE, 33133
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: J. Lorenzana — 7/14/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mandatory) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PC	11 TITLE	P	☒ Change ☐ Addition
NAME	GOMEZ, CLAUDIO Z	12 NAME	GOMEZ, CLAUDIO ZAPATA	
STREET ADDRESS	2699 SO. BAYSHORE DRIVE, PH-B	13 STREET ADDRESS	2601 SO. BAYSHORE DRIVE, S_1200	
CITY-ST-ZIP	MIAMI FL 33133	14 CITY-ST-ZIP	COCONUT GROVE, FL 33133	
TITLE	SVC	21 TITLE	D	☒ Change ☐ Addition
NAME	BAKAS, CLAUDIO Z	22 NAME	BAKAS, CLAUDIO ZAPATA	
STREET ADDRESS	2699 SO. BAYSHORE DRIVE, PH-B	23 STREET ADDRESS	2601 SO. BAYSHORE DRIVE, S-1200	
CITY-ST-ZIP	MIAMI FL 33133	24 CITY-ST-ZIP	COCONUT GROVE, FL 33133	
TITLE	DV	31 TITLE	D	☒ Change ☐ Addition
NAME	CUENCA, RICARDO L	32 NAME	CUENCA, RICARDO LIANO	
STREET ADDRESS	2699 SO. BAYSHORE DRIVE, PH-B	33 STREET ADDRESS	2601 SO. BAYSHORE DRIVE, S-1200	
CITY-ST-ZIP	MIAMI FL 33133	34 CITY-ST-ZIP	COCONUT GROVE, FL 33133	
TITLE	TD	41 TITLE	D	☒ Change ☐ Addition
NAME	AKINCILAR, HERNAN Z	42 NAME	ANKICILAR, HERNAN ZAPATA	
STREET ADDRESS	2699 SO. BAYSHORE DRIVE, PH-B	43 STREET ADDRESS	2601 SO. BAYSHORE DRIVE, S-1200	
CITY-ST-ZIP	MIAMI FL 33133	44 CITY-ST-ZIP	COCONUT GROVE, FL 33133	
TITLE		51 TITLE	COO	☒ Change ☐ Addition
NAME		52 NAME	TORRES, RAYMOND	
STREET ADDRESS		53 STREET ADDRESS	2601 SO. BAYSHORE DRIVE, S_1200	
CITY-ST-ZIP		54 CITY-ST-ZIP	COCONUT GROVE, FL 33133	
TITLE		61 TITLE	OFFICER	☒ Change ☐ Addition
NAME		62 NAME	LORENZANA, JORGE	
STREET ADDRESS		63 STREET ADDRESS	2601 SO. BAYSHORE DRIVE, S-1200	
CITY-ST-ZIP		64 CITY-ST-ZIP	COCONUT GROVE, FL 33133	

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 if changed, or on an attachment with an address.

SIGNATURE: J Lorenzana — 7/14/95 — (305) 856-8804
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #

0134103 CP