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 # **F95000006168 (7)**

1. Corporation Name

MIGUEL KAUPERT, INC.

Principal Place of Business
23532 EL TORO RD
SUITE 12
EL TORO CA 92630

Mailing Address
23532 EL TORO RD
SUITE 12
EL TORO CA 92630

3. Date Incorporated or Qualified: 12/19/1995

3a. Date of Last Report:

4. FEI Number: 95-3685065 — Applied For / Not Applicable

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

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

KAUPERT, MIGUEL
201 CRANDON BLVD #166
KEY BISCAYNE FL 33149

10. Name and Address of New Registered Agent

81 Name: SAME
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.

X SIGNATURE: _____ Date: 3/10/96
Signature and/or printed name of registered agent (NOTE: Registered Agent's signature required for any change)

12. OFFICERS AND DIRECTORS

TITLE	CPD	☐ DELETE
NAME	KAUPERT, MIGUEL	
STREET ADDRESS	201 CRANDON BLVD #166	
CITY-ST-ZIP	KEY BISCAYNE FL 33149	
TITLE	VCVS	☐ DELETE
NAME	KAUPERT, SILVIA	
STREET ADDRESS	201 CRANDON BLVD #166	
CITY-ST-ZIP	KEY BISCAYNE FL 33149	
TITLE	TD	☐ DELETE
NAME	KAUPERT, SILVIA	
STREET ADDRESS	201 CRANDON BLVD #166	
CITY-ST-ZIP	KEY BISCAYNE FL 33149	
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		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
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		

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***200.00

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.

X **SIGNATURE:** _____ SILVIA KAUPERT — Date: 3/10/96 — Daytime Phone # (714) 837-8220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SG 3-13-96

CR2E034 (12/95)