

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95357 (2)

1. Corporation Name

MIRFER INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

1605 SW 107TH AVE #202-A
MIAMI FL 33165

1605 SW 107TH AVE #202-A
MIAMI FL 33165

2. Principal Place of Business

2a. Mailing Address

21 1405 S.W. 107 Ave

26 1405 S.W. 107 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 201 C

27 201 C

City & State

City & State

23 Miami FL

28 Miami FL

Zip

Zip

Country

Country

24 33174 25 Dade

29 33174 30 Dade

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/10/1982

3a. Date of Last Report

04/13/1995

4. FEI Number

59-2212089

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. 193.03? Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

CABEZA, MIRIAM
1605 SW 107TH AVE #202-A
MIAMI 33165

81 Name Miriam Cabeza

82 Street Address (P.O. Box Number is Not Acceptable)

953 N.W. 106 Ave Cir

83

84 City Miami

FL

85

Zip Code

33172

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

Miriam Cabeza

Miriam Cabeza

5/31/96

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE PD
NAME CABEZA, MIRIAM
STREET ADDRESS 953 NW 106TH AVE CIR
CITY-ST-ZIP MIAMI, FL 00000

☐ DELETE

TITLE VS
NAME CABEZA, FERNANDO
STREET ADDRESS 953 NW 106TH AVE CIR
CITY-ST-ZIP MIAMI, FL 00000

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ 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 supplementary 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:

Miriam Cabeza

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/31/96 (305) 559-7733

CR2E034 (12/95)