

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -4 PM 11: 56

DOCUMENT # **F98938** (6)

1. Corporation Name

AMERICAN CAPITAL ADVISORY SERVICES, INC.

Principal Place of Business

316 ROYAL POINCIANA PLAZA
% DONALD W. CARSON
PALM BEACH FL 33480

Mailing Address

316 ROYAL POINCIANA PLAZA
% DONALD W. CARSON
PALM BEACH FL 33480

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/10/1982

3a. Date of Last Report
03/11/1994

4. FEI Number
59-2092602

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

2. Principal Place of Business
21 **2600 SW Third Ave.**

2a. Mailing Address
26 **2600 SW Third Ave.**

Suite, Apt. #, etc.
22 **6th Floor**

Suite, Apt. #, etc.
27 **6th Floor**

City & State
23 **Miami FL**

City & State
28 **Miami FL**

Zip
24 **33129**

Country

Zip
29 **33129**

Country

9. Name and Address of Current Registered Agent

**CARSON, DONALD W.
316 ROYAL POINCIANA PLAZA
PALM BEACH FL 33480**

10. Name and Address of New Registered Agent

81 Name **FELIX E. GRANADOS DP**
82 Street Address (P.O. Box Number is Not Acceptable)
2600 SW Third Avenue
83 **6th Floor**
84 City **Miami** FL 85 Zip Code **3**

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

(DATE) Registered Agent signature required when renewing

3/23/95

12. OFFICERS AND DIRECTORS

TITLE **DS**
NAME **FANJUL, ALFONSO**
STREET ADDRESS **316 ROYAL POINCIANA PLZA**
CITY ST ZIP **PALM BEACH FL**

TITLE **DC**
NAME **FANJUL, JOSE F**
STREET ADDRESS **316 ROYAL POINCIANA PLZA**
CITY ST ZIP **PALM BEACH FL**

TITLE **TV**
NAME **KANAI, DENNIS J.**
STREET ADDRESS **316 ROYAL POINCIANA PLZA**
CITY ST ZIP **PALM BEACH FL**

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **DC** ☒ Change ☐ Addition
12 NAME **FANJUL, ALFONSO**
13 STREET ADDRESS **2600 SW Third Ave. 6th Fl**
14 CITY ST ZIP **Miami FL 33129**

21 TITLE **DC** ☒ Change ☐ Addition
22 NAME **FANJUL, JOSE F**
23 STREET ADDRESS **2600 SW Third Ave. 6th Fl**
24 CITY ST ZIP **Miami FL 33129**

31 TITLE **DV** ☐ Change ☒ Addition
32 NAME **MURRAY, KENNETH J.**
33 STREET ADDRESS **2600 SW Third Ave. 6th Fl**
34 CITY ST ZIP **Miami FL 33129**

41 TITLE **TV** ☒ Change ☐ Addition
42 NAME **KANAI, DENNIS J.**
43 STREET ADDRESS **2600 SW Third Ave 6th Fl**
44 CITY ST ZIP **Miami FL 33129**

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY ST ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY ST ZIP

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 (27604), 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

Dennis J. Kanai

3/23/95 (305) 858-0519