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
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 17 AM 11:13

DOCUMENT # G09129 (9)

1. Entity Name

P. P. I. INVESTMENTS, INC.

Principal Place of Business

15330 S.W. 55 TERR
MIAMI, FL ORIDA 33185

Mailing Address

15330 S.W. 55 TERR
MIAMI, FL ORIDA 33185

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/22/1982

3a. Date of Last Report: 03/18/1994

2. Principal Place of Business
21
Suite, Apt. # or Bldg.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. # or Bldg.
27
City & State
28
Zip 29 County 30

4. FEI Number: 59-2240752 ☐ 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

SOTOLONGO, ARMANDO O.
15330 S.W. 55 TERR
MIAMI FL 33185

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 Section(s) 607.0501 and/or 617.0501, 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. The corporation agrees to notify the corporation's board of directors hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section(s) 607.0505, Florida Statutes.

SIGNATURE

12. OFFICER/DIRECTOR DATA		13. ADDITIONS, CHANGES OR DELETIONS TO OFFICER/DIRECTOR DATA	
Title	PD	Title	☐ Change ☐ Addition
Name	SOTOLONGO, ARMANDO, O.	Name	
Address	15330 S.W. 55TH TERRACE	Address	
City-St-Zip	MIAMI FL	City-St-Zip	
Title	SD	Title	☐ Change ☐ Addition
Name	GONZALEX, IBRAHIM	Name	
Address	15330 S.W. 55TH TERRACE	Address	
City-St-Zip	MIAMI FL	City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	

14. [illegible]

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

0207057 CP