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CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **G22682**

(0)

95 MAR 21 PM 3:59

1. Corporation Name

LUROC CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

% LUIS R. CACERES, JR.
8711 SW 20TH TERR.
MIAMI FL 33185

Mailing Address

% LUIS R. CACERES, JR.
8711 SW 20TH TERR.
MIAMI FL 33165

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
01/28/1983

3a. Date of Last Report
02/18/1994

4. FEI Number
59-2292972

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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CACERES, LUIS R. JR.
8711 SW 20TH TERR.
MIAMI FL 33165

81 Name

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.

SIGNATURE

Luis R. Caceres Jr.

(NOTE: Registered Agent signature required when reappointing)

3/14/95

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME CACERES JR, LUIS R
STREET ADDRESS 8711 S W 20TH TERR
CITY-ST-ZIP MIAMI, FL 00000

TITLE DT
NAME CACERES III, LUIS R
STREET ADDRESS 8711 S W 20TH TERR
CITY-ST-ZIP MIAMI, FL 00000

TITLE DV
NAME CACERES, MARGARITA
STREET ADDRESS 8711 SW 20TH TERR
CITY-ST-ZIP MIAMI FL

TITLE DS
NAME CACERES, JULIO R.
STREET ADDRESS 8711 SW 20TH TERR
CITY-ST-ZIP MIAMI FL

TITLE D
NAME CACERES, MARIA T
STREET ADDRESS 8711 SW 20 TR
CITY-ST-ZIP MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 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:

Luis R. Caceres Jr. (LUIS R. CACERES, JR.) 3/14/95 (306) 552-8433

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Date)

Signature (Typed Name)