

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 # **G22721** (6)

1. Corporation Name

BAMSA CORP.



Principal Place of Business

Mailing Address

**C/O RAUL E. VALDES-FAULI
1 BISCAYNE TOWER, 2 S BISCAYNE BLVD. #3400
MIAMI FL 33131-1807**

**C/O RAUL E. VALDES-FAULI
1 BISCAYNE TOWER, 2 S BISCAYNE BLVD. #3400
MIAMI FL 33131-1807**

3. Date Incorporated or Qualified
01/31/1983

3a. Date of Last Report
04/17/1995

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

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VALDES-FAULI CORP SVCS INC
ONE BISCAYNE TWR STE 3400
2 SO BISCAYNE BLVD
MIAMI FL 33131**

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

Signature typed or printed name of registered agent and the "I am" and "I accept" statements.

(Print) Registered Agent Signature (to be used if not registered agent)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PD BRODSKY, JACK**
STREET ADDRESS **2019 E COUNTRY CLUB DR.**
CITY - ST - ZIP **N. MIAMI BEACH FL**

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

TITLE ☐ DELETE
NAME **VSD ROSENDORN, ANNY**
STREET ADDRESS **2019 E COUNTRY CLUB DR.**
CITY - ST - ZIP **N. MIAMI BEACH FL**

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

TITLE ☐ DELETE
NAME **T BRODSKY, GISELA**
STREET ADDRESS **2019 E COUNTRY CLUB DR.**
CITY - ST - ZIP **N. MIAMI BEACH FL**

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

TITLE ☐ DELETE
NAME **AS VALDES-FAULI, RAUL E.**
STREET ADDRESS **ONE BISCAYNE TOWER, #3400**
CITY - ST - ZIP **MIAMI FL**

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACK BRODSKY

4/9/96 (305) 376-6000

CR2E034 (12/95)