

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 # **G29432**

(3)

1. Corporation Name

TELCO INVESTMENT CORP.



Principal Office of Business

Mailing Address

**4401 ISLAND RD
MIAMI FL 33137
US**

**4401 ISLAND RD
MIAMI FL 33137
US**

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

24 Country

29 Country

9. Name and Address of Current Registered Agent

**DIAZ-BERGNES, GABRIEL
45 S.W. 36TH COURT
MIAMI FL 33135**

3. Date Incorporated or Qualified

02/22/1983

3a. Date of Last Report

04/28/1995

4. FEI Number

59-2494554

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

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 the provisions of Sections 607.01(2) and 607.15(6), 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 607.01(2), Florida Statutes.

SIGNATURE

Signature of New Agent (Signature must be witnessed)

DATE

12. OFFICERS AND DIRECTORS

1. NAME ☐ DELETE

**PD
MANDINI, VITTORIO
4401 ISLAND RD
MIAMI FL**

2. NAME ☐ DELETE

3. NAME ☐ DELETE

4. NAME ☐ DELETE

5. NAME ☐ DELETE

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29. NAME ☐ DELETE

30. NAME ☐ DELETE

13.

1. NAME

2. NAME

3. STREET ADDRESS

4. CITY - ST - ZIP

5. CITY

6. NAME

7. NAME

8. STREET ADDRESS

9. CITY - ST - ZIP

10. CITY

11. NAME

12. NAME

13. STREET ADDRESS

14. CITY - ST - ZIP

15. CITY

16. NAME

17. NAME

18. STREET ADDRESS

19. CITY - ST - ZIP

20. CITY

21. NAME

22. NAME

23. STREET ADDRESS

24. CITY - ST - ZIP

25. CITY

26. NAME

27. NAME

28. STREET ADDRESS

29. CITY - ST - ZIP

30. CITY

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-96

305-573 3677

CR2E034 (12/95)