

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

APPROVED
AND
FILED

55 MAY -1 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G39575**

(7)

1. Corporation Name

DARIC CORPORATION

Principal Place of Business

**3400 ONE BISCAYNE TOWER
2 S. BISCAYNE BLVD.
MIAMI FL 33131-1809**

Mailing Address

**3400 ONE BISCAYNE TOWER
2 S. BISCAYNE BLVD.
MIAMI FL 33131-1809**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **05/06/1983** 3a. Date of Last Report **04/26/1994**

4. FEI Number **59-2455625** 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. Does corporation have liability for advertising fees under Ch. 408, F.S. Florida Statutes: ☒ Yes ☐ No

2. Principal Place of Business

21. State: Apt. # etc.

2a. Mailing Address

26. State: Apt. # etc.

22. City & State

27. City & State

23. City & State

28. City & State

24. City & State

29. City & State

30. City & State

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VALDES-FAULI CORPORATE SERVICES INC
3400 ONE BISCAYNE TWR., 2 S. BISCAYNE BD
MIAMI FL 33131**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.05(2) and 607.15(8), Florida Statutes, the above named corporation certifies 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 Sections 607.05(2), Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Director)

(Signature of Applicant or Registered Agent)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME **PD JIMENEZ, BERNAL, JR.**
2. STREET ADDRESS **2333 BRICKELL AVE.**
3. CITY, STATE, ZIP **MIAMI FL**

1. NAME **VD JIMENEZ, BERNAL, SR.**
2. STREET ADDRESS **2333 BRICKELL AVE.**
3. CITY, STATE, ZIP **MIAMI FL**

1. NAME **S GUTIERREZ, GRACIELA**
2. STREET ADDRESS **2333 BRICKELL AVE.**
3. CITY, STATE, ZIP **MIAMI FL**

1. NAME **T MIRIAM, JIMENEZ**
2. STREET ADDRESS **2333 BRICKELL AVE.**
3. CITY, STATE, ZIP **MIAMI FL**

1. NAME ☐ Change ☐ Addition

1. NAME ☐ Change ☐ Addition

1. NAME ☐ Change ☐ Addition

1. NAME ☐ Change ☐ Addition

1. NAME ☐ Change ☐ Addition

1. NAME ☐ Change ☐ Addition

1. NAME ☐ Change ☐ Addition

1. NAME ☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied on this filing is substantially correct and does not qualify for the exemption provided in Sections 607.05(2), Florida Statutes. I further certify that no fraud or irregularity is involved in the filing of this report and that no material misstatement or omission is made and that my signature shall have the same legal effect as if made under oath. I am in full compliance with the provisions of the corporation's board of directors empowered to make this report as required by Chapter 407, Florida Statutes, and that my name appears as Block 1, on Block 1 with a change of name or address.

SIGNATURE:

SIGNATURE AND TITLE OF REGISTERED AGENT OR DIRECTOR
BERNAL JIMENEZ JR. APR 19, 1995 (506) 2505256