

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 # G43555 (3)

1. Corporation Name

NATIONAL ASSURANCE CORPORATION

Principal Place of Business

2500 N.W. 79th Avenue
Miami, Florida 33122

Mailing Address

2500 N.W. 79th Avenue
Miami, FL 33122

3. Date Incorporated or Qualified
06/14/1983

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-2401101

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

LOPEZ, JORGE A ESO.
2500 N.W. 79TH AVENUE
MIAMI FL 33122

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 607.0502 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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME ALVAREZ, JOSE M.
STREET ADDRESS 2500 N.W. 79TH AVE
CITY-ST-ZIP MIAMI, FL 33122

☐ DELETE

TITLE DT
NAME TORGAS, ED S.
STREET ADDRESS 2500 N.W. 79TH AVE
CITY-ST-ZIP MIAMI, FL 33122

☐ DELETE

TITLE VDA
NAME SOTO, JOHN
STREET ADDRESS 2500 N.W. 79TH AVE
CITY-ST-ZIP MIAMI, FL 33122

☐ DELETE

TITLE VD
NAME VALDES-FAULI, JUAN
STREET ADDRESS 2500 N.W. 79TH AVE
CITY-ST-ZIP MIAMI, FL 33122

☐ DELETE

TITLE S
NAME LOPEZ, JORGE A.
STREET ADDRESS 2500 N.W. 79TH AVE
CITY-ST-ZIP MIAMI, FL 33122

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

☐ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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-07/03/96--01108--050
***200.00

☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE A. LOPEZ

4/29/96

Date

(308) 715-0000

Ext 3329

Daytime Phone

CS 5/1/96