FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

/41

NARANJO INVESTORS, INC					
Principal Place of Business 7853 W. 15TH COURT P.O. BOX 5134		Mailing Address 7853 W. 15TH COURT P.O. BOX 5134			
HIALEAH FL		HIALEAH FL 33014			
				3. Date Incorporated or Qualified 3. 02/16/1984	a. Date of Last Report 03/17/1995
	ice of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #		26		59-2388338	Not Applicable
2]	. eus.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
≀3] Zip	Country	28 Z _{(P}	Country	Trust Fund Contribution 8. This corporation has liability for inter	Added to Fees
4]	25	29	30	Florida Statutes Yes	
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Regis	stered Agent
			81 Name		
	IO, PEDRO		82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
7853 W.	1 FL 33014		83		
1 II/ALL/A	172 00014				
			84 City		FL 85 Zip Code
or registere familiar with SIGNATURE	ad agent, or both, in the State of Florin, and accept the obligations of, Sect Structure, tyring or printed notice of registered agent OFFICERS AN	da Such Change was authorizion 607.0505, Florida Statutes and title if applicable (NO	ed by the corporation's boa	ration submits this statement for the purposited of directors. I hereby accept the appointment of the purposition of the purpos	nent as registered agent. I am
m.c	P\$	☐ DELETE	1. 1 TITLE		☐ Change ☐ Addition
NAME	NARANJO, PEDRO		1.2 NAME		
STHEE! ADDRESS	7853 W. 15TH CT. HIALEAH FL		1.3 STREET ADDRESS		
CHY ST ZIP	TD	☐ DELFTE	1 4 CITY - ST - ZIP 2 1 TITLE		Change Addition
NAME	NARANJO, PEDRO	<u> </u>	2.2 NAME		□ puringe □ required
STREET ADDRESS	7853 W. 15TH CT.		2 3 STREET ADDRESS		
City - St - ZIP	HIALEAH FL		2 4 CITY - ST - ZIP		
THE	vp Naranjo, Roberto p	☐ DELETE	3 1 TITLE		Change Addition
NAME STREET ADDRESS	7853 W 15TH CT		3 2 NAME		
City-St-ZiF	HIALEAH FL		3 3 STREET ADDRESS 3 4 CITY - ST - ZIP		
TITLE	V\$	DELETE	4. 1 TITLE		Change Addition
NAME	naranjo, roberto p		4.2 NAME		
STREET ADDRESS	7853 W 15TH CT		4.3 STREET ADDRESS		
CITY - ST - ZIP TITUE	HIALEAH FL	☐ DELETE	4.4 CITY - ST - ZIP		5 0000 5 MES
NAME		ר מניניני	5 1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
Ci1Y - S1 - ZIP			5.4 CITY+ST-ZIP		
1016		DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
C_IY_SI_ZP 14.	certify that the information supplied	with this filing is voluntarily furn	64 CITY-ST-ZIP sished and does not qualify for	or the exemption stated in Section 119.07(3	i(k) Florida Statutes I further
certify that I	the information indicated on this annual am an officer of director of the corporations of the corporations as a first section of the corporations	alveport or supplemental ann action or the receiver or truste to an alrachment with an addr	ual report is true and accura e empowered to execute this	te and that my signature shall have the sam s report as required by Chapter 607, Florida	e legal effect as if made under Statutes; and that my name
SIGNAT	URE SIGNATURE AND PRES OF	PRINTED NAME OF GIGNING	A OR DIRECTOR	Date	Destime Phone #