

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 # H60125 (2)

1. Corporation Name

BUSINESS & ECONOMIC ANALYSTS INC.



Principal Place of Business

8100 SW 81 DRIVE
SUITE 220
MIAMI FL 33143

Mailing Address

8100 SW 81 DRIVE
SUITE 220
MIAMI FL 33143

3. Date Incorporated or Qualified
06/04/1985

3a. Date of Last Report
07/28/1995

2. Principal Place of Business

2a. Mailing Address

21 8100 SW 81 Drive

26 8100 SW 81 Drive

4. FEI Number

59-2540589

Applied For

Not Applicable

22 Suite, Apt. #, etc.

220

27 Suite, Apt. #, etc.

220

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

23 City & State

Miami

28 City & State

Miami

6. Election Campaign Financing

☐ \$5.00 May Be Added to Fees

24 Zip

33143

Country

U.S.A.

29 Zip

33143

Country

U.S.A.

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUESO, ROBERTO E.
8100 S. W. 81 DRIVE
SUITE 220
MIAMI FL 33143

81 Name Robert E. BUESO

82 Street Address (P.O. Box Number is Not Acceptable)
8100 SW 81 Drive Suite 220

83 Suite 220

84 City Miami

FL 85 Zip Code 33143

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

4/25/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME ST BUESO, MARTHA
STREET ADDRESS 8100 SW 81 DRIVE, STE 220
CITY-STATE-ZIP MIAMI, FL 33143

TITLE ☐ DELETE

NAME PD BUESO, ROBERTO
STREET ADDRESS 8100 SW 81 DRIVE, STE 220
CITY-STATE-ZIP MIAMI, FL 33143

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

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

DATE

TELEPHONE

Robert E. Bueso

4/25/96

(305) 270-9700

CR2E034 (12/95)