

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Candace B. Mathier
Secretary of State
1905 BANKERS BUILDING
TALLAHASSEE, FLORIDA 32399-0001

APPROVED
AND
FILED

DOCUMENT # **H68782**

(2)

04/29/1995 9:10

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

BACURANAO R TRANSFER, INC.

Principal Office Address

Minor Address

10015 S.W. 2 TERR
MIAMI FL 33174

10015 S.W. 2 TERR
MIAMI FL 33174

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/29/1985	3a. Date of Last Report 04/29/1994
4. FEI Number 59-2563378	Appeal For Fee Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financials Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has applied for status as a subsidiary corporation under the Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Office Address	2a. Minor Address
21. State, Apt # or P.O.	26. State, Apt # or P.O.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. County	30. County

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEL CERRO, MARGARITA
10015 S.W. 2 TERR
MIAMI FL 33174

B1. Name	B5. Zip Code
B2. Street Address (P.O. Box Number is Not Acceptable)	FL
B3. City	

11. Pursuant to the provisions of Sections 607.021, 607.022 and 607.023, 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 in compliance with and subject to the provisions of Section 607.023, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
TITLE	P RODRIGUEZ, RICARDO 10015 S.W. 2 TERR MIAMI FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME	DEL CERRO, MARGARITA 10015 S.W. 2 TERR MIAMI FL	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
STREET ADDRESS		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
CITY		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
STATE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
ZIP		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
COUNTRY		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add
COUNTY		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Add

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exceptions stated in Sections 607.021(4)(b), Florida Statutes. I further certify that the information sets forth 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. This filing is a filing on behalf of the corporation or the manager or trustee appointed to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of the report.

SIGNATURE: *Margarita del Cerro* **Margarita del Cerro** 4/29/95 5921058
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR