SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H83729 (4)

1. Corporation Name

CAISA CORPORATION

Principal Place of Business	Mailing Address
9130 CHATSWORTH CASCADES ~~320 RIVERDALE RD~~ BOCA RATON FL 33434 US	9130 CHATSWORTH CASCADES ~~320 RIVERDALE RD~~ BOCA RATON FL 33434 US

2. Principal Place of Business: 21 FLORIDA	2a. Mailing Address: 26 2000 BANKS RD.
Suite, Apt #, etc: 22 201 - I	Suite, Apt. #, etc: 27
City & State: 23 MARGATE, FL.	City & State: 28
Zip: 24 33063 Country: 25 U.S.A.	Zip: 29 Country: 30

3. Date Incorporated or Qualified: 11/04/1985
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-2649613 ☐ 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. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

ROMAGOSA, GEORGE E.
320 RIVERDALE RD
PALM SPRINGS FL

10. Name and Address of New Registered Agent

81 Name: ROMAGOSA, GEORGE E.
82 Street Address (P.O. Box Number is Not Acceptable): 9130 CHATSWORTH CASCADES
83
84 City: BOCA RATON FL 85 Zip Code: 33434

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 ____________ DATE ____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DPS	☐ DELETE
NAME	ROMAGOSA, GEORGE E.	
STREET ADDRESS	320 RIVERDALE ROAD	
CITY-ST-ZIP	PALM SPRINGS FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	V	☐ Change ☒ Addition
1.2 NAME	WOLFSON, DANIEL	
1.3 STREET ADDRESS	23248E ISLAND VIEW DRIVE	
1.4 CITY-ST-ZIP	BOCA RATON, FL 33433	
2.1 TITLE	V	☐ Change ☒ Addition
2.2 NAME	POSTAL, ELENA	
2.3 STREET ADDRESS	P.O. BOX 16183, W/A	
2.4 CITY-ST-ZIP	W PALM BEACH, FL 33416	
3.1 TITLE	S, T	☐ Change ☒ Addition
3.2 NAME	AMY MILLS	
3.3 STREET ADDRESS	5240 SW 5TH STREET	
3.4 CITY-ST-ZIP	MARGATE, FL 33068	
4.1 TITLE	DPS	☒ Change ☐ Addition
4.2 NAME	ROMAGOSA, GEORGE	
4.3 STREET ADDRESS	9130 CHATSWORTH CASCADES	
4.4 CITY-ST-ZIP	BOCA RATON, FL 33434	
5.1 TITLE	600001915826	☐ Change ☐ Addition
5.2 NAME	-08/08/96--01014--004	
5.3 STREET ADDRESS	***233.75	
5.4 CITY-ST-ZIP		
6.1 TITLE	8-7-96	☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (3/96)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: GEORGE ROMAGOSA 7/1/96 407 479 9215
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #