

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

CORPORATION  
ANNUAL REPORT  
1995



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

**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**  
**95 FEB -7 PM 2:35**

DOCUMENT # **J62354** (2)

1. Corporation Name  
**TUMBACO, INC.**

Principal Place of Business Mailing Address  
**7855 N.W. 12TH ST. #115 MIAMI FL 33126-8036** **7855 N.W. 12TH ST. #115 MIAMI FL 33126-0036**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24	25	29	30

3. Date incorporated or Qualified	3a. Date of Last Report
<b>03/18/1987</b>	<b>04/18/1994</b>
4. FEI Number	Applied For
<b>59-2702519</b>	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**JAWREGUI, MARIA EUGENIA**  
**6520 SW 46 STREET**  
**MIAMI FL 33155**

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 agent 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: *Maria Eugenia Jawregui* DATE: **2/2/95**

12. OFFICERS AND DIRECTORS

TITLE	<b>S</b>
NAME	<b>DIEZ, GANGOTENUDE DE</b>
STREET ADDRESS	<b>STREET ANTONIO FLORES JIGON #20</b>
CITY - ST - ZIP	<b>QUITO EC</b>
TITLE	<b>D</b>
NAME	<b>DIEZ, EDUARDO</b>
STREET ADDRESS	<b>STREET ANTONIO FLORES JIGON #20</b>
CITY - ST - ZIP	<b>QUITO EC</b>
TITLE	<b>D</b>
NAME	<b>LANGPAP, GUNTER</b>
STREET ADDRESS	<b>HILDALGO DE PINTO 788</b>
CITY - ST - ZIP	<b>QUITO EC</b>
TITLE	<b>D</b>
NAME	<b>ALVAREZ, FERNANDO X.</b>
STREET ADDRESS	<b>2290 W. MARION AVENUE</b>
CITY - ST - ZIP	<b>PUNTA GORDA FL</b>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - 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 110.07(3)(b), 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: *Maria Eugenia Jawregui* DATE: **2/2/95**