

**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 # **K12319 (5)**

1. Corporation Name  
**FREE PORT ENTERPRISES, INC.**



Principal Place of Business Mailing Address  
**1440 J.F. KENNEDY CAUSEWAY #400 MIAMI BCH. FL 33139 US**

3. Date Incorporated or Qualified **01/20/1988** 3a. Date of Last Report **01/27/1995**  
4. FEI Number **65-0041431** 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

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc 26 Suite, Apt. #, etc  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 **33141** 25 Country 29 **33141** 30 Country

9. Name and Address of Current Registered Agent  
**DALEY DAVID E  
7801 COLLINS AVE  
MIAMI BEACH FL 33141**

10. Name and Address of New Registered Agent  
81 Name **CARLOS J. VILLALOBOS**  
82 Street Address (P.O. Box Number is Not Acceptable) **1440 J.F. Kennedy Cswy.**  
83 **Suite 400**  
84 City **North Bay Village** FL 85 Zip Code **33141**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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: *Carlos J. Villalobos*

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	YACOOB, ELI	
STREET ADDRESS	1440 J.F. KENNEDY CSWY, STE 400	
CITY-ST-ZIP	NORTH BAY VILLAGE FL	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	YACOOB, ELI	
STREET ADDRESS	9 ISLAN AV. AP 1809	
CITY-ST-ZIP	MIAMI BEACH, FL 33139	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	<b>CFO/D</b>
33 STREET ADDRESS	<b>CARLOS J. VILLALOBOS</b>
34 CITY-ST-ZIP	<b>1440 J.F. Kennedy Cswy.</b>
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	<b>Suite 400</b>
43 STREET ADDRESS	<b>North Bay Village FL 33141</b>
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 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: *Carlos J. Villalobos*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/14/98 305-865-2419

CR2E034 (3/96)