

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 1:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(DO NOT WRITE IN THIS SPACE)

DOCUMENT # **K12718** (8)

1. Corporation Name:
JULIO NUNEZ, INC.

Principal Place of Business: **% JULIO NUNEZ
10427 S.W. 23RD ST
MIAMI FL 33165**

Mailing Address: **% JULIO NUNEZ
10427 S.W. 23RD ST
MIAMI FL 33165**

3. Date Incorporated or Qualified 01/25/1988	3a. Date of Last Report 02/01/1994
4. FEI Number 65-0025085	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This Corporation has, directly or indirectly, been organized under Florida Statutes: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt # or City	26. State, Apt # or City
22. City, State, Zip	27. City, State, Zip
24. City, State, Zip	25. City, State, Zip
29. City, State, Zip	30. City, State, Zip

9. Name and Address of Current Registered Agent

**NUNEZ, JULIO
10427 S.W. 23RD ST
MIAMI FL 33165**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Applicable)

83.

84. City

85. State

FL

11. Pursuant to the provisions of Sections 607.0105, 607.0106, and 607.0107, Florida Statutes, this officer, having examined the records of this corporation, certifies that the information furnished by the corporation for the purpose of changing its registered office is true and correct as of the date of filing of this report. Such change was authorized by the corporation in accordance with the provisions of Chapter 607, Florida Statutes, and that my name appears as Block 12 on Block 13 of this report, or on an attachment with an address.

12. OFFICERS AND DIRECTORS

NAME	PST NUNEZ, JULIO 10427 S.W. 23RD ST MIAMI FL
STREET ADDRESS	
CITY, STATE, ZIP	
NAME	D NUNEZ, JULIO 10427 S.W. 23RD ST MIAMI FL
STREET ADDRESS	
CITY, STATE, ZIP	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	
NAME	
STREET ADDRESS	
CITY, STATE, ZIP	

13. ALL OTHERS (NAME, ADDRESS, CITY, STATE, ZIP)

NAME		Change	Addition
STREET ADDRESS			
CITY, STATE, ZIP			
NAME		Change	Addition
STREET ADDRESS			
CITY, STATE, ZIP			
NAME		Change	Addition
STREET ADDRESS			
CITY, STATE, ZIP			
NAME		Change	Addition
STREET ADDRESS			
CITY, STATE, ZIP			

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 607.0105, Florida Statutes. I further certify that the information indicated on this general report or on any additional 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 make this report as required by Chapter 607, Florida Statutes, and that my name appears as Block 12 on Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Julio Nunez* **JULIO NUNEZ**
PRES
4/26/95 554-0814