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95 MAY -1 AM 9:55

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # K19262 (0)

1. Corporation Name

YAMAKO INTERNATIONAL CORPORATION

Principal Place of Business

**C/O JESUS A. OCAMPO
5177 N.W. 74TH AVE.
MIAMI FL 33166
US**

Mailing Address

**YAMAKO INTERNATIONAL CORPORATION
5177 N.W. 74TH AVE.
MIAMI FL 33166
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/28/1988

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0036343

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**

9. The corporation has liability for corporate tax under S. 108 (1)(2)

Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**LOZANO, YOLANDA
5177 N.W. 74TH AVE.
MIAMI FL 33166**

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 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

Signature (Typed or printed name of registered agent and S. 108 (1)(2))

(NOTE: Registered Agent Signature required when substituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VP
NAME	OCAMPO, JESUS A.
STREET ADDRESS	8180 GENEVA CT., B-428
CITY ST ZIP	MIAMI FL
TITLE	T
NAME	ORTIZ, JULIO
STREET ADDRESS	5177 N.W. 74TH AVE.
CITY ST ZIP	MIAMI FL
TITLE	S
NAME	SANCHEZ, TARCISIO
STREET ADDRESS	5177 N.W. 74TH AVE.
CITY ST ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY ST ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY ST ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY ST ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY ST ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY ST ZIP	

14. I do hereby certify that the information supplied with this report 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 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 officer or member 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 in an attachment with an address.

SIGNATURE: ✓

JESUS A. OCAMPO

✓ **04-27-95** ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Printed Name