

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT #

1. Corporation Name

K20712

GLOBAL PREMIUM FINANCE CORPORATION

Principal Place of Business

Mailing Address

10691 N. KENDALL DR. SUITE 304
MIAMI, FLORIDA 33176

3. Date Incorporated or Qualified

3a. Date of Last Report

4/11/1988

2. Principal Place of Business

2a. Mailing Address

21 10691 N. Kendall

26

4. FEI Number

Applied For

65-0056429

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 MIAMI, FL.

28 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 33176

Country

29

Country

25 DADE

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REID RODRIGUEZ
10720 SW 27th St.
MIAMI, FL 33165

81 Name EVALDO F. DUPUY

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

10691 N. Kendall

83 SUITE 304

84 City MIAMI

85 Zip Code FL 33176

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

Evaldo F. Dupuy

(NOTE: Registered Agent signature required when reinstating)

4-19-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE
NAME REID RODRIGUEZ
STREET ADDRESS 10720 SW 27th St.
CITY - ST - ZIP Miami, FL 33165

1 1 TITLE PRESI, VICE-PRES, SEC, TRB Change ☐ Addition
1 2 NAME EVALDO F. DUPUY
1 3 STREET ADDRESS 10691 N. Kendall Suite 304
1 4 CITY - ST - ZIP Miami, FL 33176 ☐ Change ☐ Addition

TITLE ☒ DELETE
NAME Vice-President
STREET ADDRESS Ralph Rodriguez
CITY - ST - ZIP

2 1 TITLE ☐ Change ☐ Addition
2 2 NAME
2 3 STREET ADDRESS
2 4 CITY - ST - ZIP

TITLE ☒ DELETE
NAME Secretary
STREET ADDRESS Lillian Rodriguez
CITY - ST - ZIP

3 1 TITLE ☐ Change ☐ Addition
3 2 NAME
3 3 STREET ADDRESS
3 4 CITY - ST - ZIP

TITLE ☒ DELETE
NAME Treasurer
STREET ADDRESS Elda Rodriguez
CITY - ST - ZIP

4 1 TITLE
4 2 NAME 800001793838
4 3 STREET ADDRESS -04/25/96--01015--039
4 4 CITY - ST - ZIP ***200.00 ☐ Change ☐ Addition

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5 1 TITLE ☐ Change ☐ Addition
5 2 NAME
5 3 STREET ADDRESS
5 4 CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6 1 TITLE ☐ Change ☐ 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-96

DATE

(305) 598-5161

Daytime Phone #

CR2E034 (12/95)