FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

DOCUMENT # **K32035** **(3)**

1. Corporation Name
CONDOR OVERSEAS, INC.

Principal Place of Business	Mailing Address
1775 NW 97TH AVE MIAMI FL 33172 US	P.O. BOX 527405 MIAMI FL 33152 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/26/1988	3a. Date of Last Report: 06/10/1994
4. FEI Number: 65-0070608	☐ 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 — 21; Suite, Apt #, etc. — 22; City & State — 23; Zip — 24; Country — 25

2a. Mailing Address — 26; Suite, Apt #, etc. — 27; City & State — 28; Zip — 29; Country — 30

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ORIZONDO, CARLOS I. 8820 S.W 58TH ST. MIAMI FL 33173	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 607.1506, 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 ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ Change ☐ Addition
NAME	ORIZONDO, CARLOS I.	
STREET ADDRESS	8820 S.W. 57TH ST.	
CITY-ST-ZIP	MIAMI FL	
TITLE	VP	☐ Change ☐ Addition
NAME	GARCIA, CONCEPCION	
STREET ADDRESS	1338 W. 80TH ST.	
CITY-ST-ZIP	HIALEAH FL	
TITLE	S	☐ Change ☐ Addition
NAME	ARTURO DE LA O	
STREET ADDRESS	9425 SW. 18TH TERR.	
CITY-ST-ZIP	MIAMI FL	
TITLE	T	☐ Change ☐ Addition
NAME	MARTINEZ, LAYDA	
STREET ADDRESS	9972 S.W. 2ND TERR	
CITY-ST-ZIP	MIAMI FL	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is sound and furnished and does not qualify for the exemption stated in Section 119.07(3)(i), 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: Orizondo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Carlos I. Orizondo

4/2/95 Date (305) 591-1105 Daytime Phone #

0420282 FP