

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandia B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K47638 (7)

1. Corporation Name

MIAMI HARDWOODS & PLYWOOD CORP.



Principal Place of Business

4238 N.W. 37TH AVENUE
MIAMI FL 33142

Mailing Address

4238 N.W. 37TH AVENUE
MIAMI FL 33142

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
11/29/1988

3a. Date of Last Report
04/14/1995

21. State, Apt. #, etc.

26. State, Apt. #, etc.

4. FEI Number
65-0100287

Applied For
Not Applicable

22. City & State

27. City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23. Zip

Country

28. Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24. ☐

25. ☐

29. ☐

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

ORTA, CALIXTO
4238 N.W. 37TH AVENUE
MIAMI FL 33142

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 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

1. TITLE	S	DELETE
2. NAME	ORTA, ELISA B.	
3. STREET ADDRESS	4238 N.W. 37TH AVENUE	
4. CITY, ST, ZIP	MIAMI FL	
5. TITLE	D	DELETE
6. NAME	ORTA, CALIXTO	
7. STREET ADDRESS	4238 N.W. 37TH AVENUE	
8. CITY, ST, ZIP	MIAMI FL	
9. TITLE		DELETE
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE		DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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 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 person 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. Changes, or additions, must be made with an address.

SIGNATURE:

Calixto Ota President Calixto Ota 2/12/96 (305) 633-4533
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)