

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 # **K55833** (3)

1. Corporation Name

PRIVATE GROUPS, INC.



Principal Place of Business

Mailing Address

**1172 SOUTH DIXIE HWY.
SUITE #115
CORAL GABLE FL 33146
US**

**1172 SOUTH DIXIE HWY.
SUITE #115
CORAL GABLES FL 33146
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**FUERTES, FELIX R.
5511 RIVIERA DR.
CORAL GABLES FL 33146**

3. Date Incorporated or Qualified

12/29/1988

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0146357

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

10. Name and Address of New Registered Agent

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) (fill in if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	DELETED
DC	FUERTES, EVANGELINA	<input type="checkbox"/>
STREET ADDRESS	823 MARTI ST	
CITY- ST- ZIP	SAN JUAN PR	
DAS	CAMERON, REGINA M	<input type="checkbox"/>
STREET ADDRESS	5511 RIVIERA DR	
CITY- ST- ZIP	CORAL GABLES FL	
DPTM	FUERTES, FELIX R	<input type="checkbox"/>
STREET ADDRESS	5511 RIVIERA DR	
CITY- ST- ZIP	CORAL GABLES FL	
DVS	FUERTES, ROBERTO	<input type="checkbox"/>
STREET ADDRESS	823 MARTI ST	
CITY- ST- ZIP	SAN JUAN PR	
DELETED		<input type="checkbox"/>
DELETED		<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	DELETED	Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME				
1.3 STREET ADDRESS				
1.4 CITY- ST- ZIP				
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME				
2.3 STREET ADDRESS				
2.4 CITY- ST- ZIP				
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME				
3.3 STREET ADDRESS				
3.4 CITY- ST- ZIP				
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME				
4.3 STREET ADDRESS				
4.4 CITY- ST- ZIP				
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME				
5.3 STREET ADDRESS				
5.4 CITY- ST- ZIP				
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)