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

PROFIT CORPORATION ANNUAL REPORT



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

1996

1. Corporation Name

DOCUMENT # **K64863** 

(9)

GULLON IMPORTS, II	INC.
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	GULLON		115, INC.							A HODDRIN DIE BING DIERE MAKE DIERE DIE BEGIN DIEN DEUT DEUT DIE FORE
 Fi	rincipal Place of	Business			Mailing Address					
% CARLOS VAZQUEZ 2901 NW 34TH ST. MIAMI FL 33142-5217			% CARLOS V/ 2901 NW 34TH MIAMI FL 3314	H ST.				Date Incorporated or Qualified		
										02/10/1989
2. Principal Place of Business			<b>⊢</b>	a. Mailing Addre	ess				4. FEI Number Applied For	
Suite, Apt. #, etc.			26	Suite, Apt. #,	etc.				65-0106358 Not Applicable  5 Codificate of Status Region	
22				27						5. Certificate of Status Desired Fee Required
22	City & State			28	City & State					6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees
	Ζιρ	I	Country		Zip		Country	,		Trust Fund Contribution Added to Fees  8. This corporation has liability for intangible tax under s 199.032,
24			25	29		3	0			Florida Statutes Yes No
		g. Name	and Address o	Current Reg	istered Agent		81	Г	Name	10. Name and Address of New Registered Agent
	VAZQUEZ	CARLO	s					L		(D.O. Day N. salassia Nat Assessable)
	12041 SW		•				82	L.	Street Addres	ss (P.O. Box Number is Not Acceptable)
	MIAMI FL	33175					83			
							84	T	City	FL 85 Zip Code
1	1. Pursuant to t	he provisi	ons of Sections	607.0502 and (	307.1508, Florida	a Statutes, t	he above r	L. nar	med corporati	tion submits this statement for the nurnose of obancing its registered office
	familiar with,	agent, or and accer	ot the obligations	s of, Section 60	17.0505, Florida	autnonzed t Statutes.	by the corp	ЮГ	ation s board	of directors. It hereby accept the appointment as registered agent. I am
SI	IGNATURE , sio	nature, typed i	or printed name of regi	Stered augot and tile	if applicable		Rogistered Ager	nt s	sonature required w	wher reinstalling) DATE
12		<b>a</b> , <b>g</b> poor.		ERS AND DIR	· · · · · · · · · · · · · · · · · · ·	(10.1	13.		-granes regards w	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TH	}	SD			☐ DELI	ETE	1. 1 TITLE			Change Addition
	IME		EZ, ALIDA				1.2 NAME			
	REET ADDRESS TY-ST-ZIP	MIAMI I	SW 40 ST				1.3 STREET			
	ILE	TD TD	<u></u>		☐ DELI	ΕΤΕ	1.4 CHTY-S 2 1 TITLE	51-	ZIF	Change Addition
Na	INE		EZ, CARLOS				2.2 NAME			
S'	REE1 ADORESS	12041	SW 40 ST				2 3 STREET	I AD	DDRESS	
	IY - SI - ZIP	MIAMI !	<u>L</u>				24 CITY - S	ST -	ZIP	
10	i				DELE	ETE	3 1 TITLE			Change Addition
	REET ADDRESS						3.2 NAME	1 41	Process	
	1Y - \$1 - ZIP						3.3 STREET 3.4 CITY - S			
<u></u> TIT					☐ DELE	ΤE	4 1 THILE	,,-,	<u>-"</u>	Change Addition
NΔ	dME						4.2 NAME			
s:	REET ADDRESS						4 3 STREET	ν	DDRESS	*
C)	TY+S1+ZIP						44 CITY-S	ST - 1	ZIP	
TII	ILF				DELE	ETE .	5 1 TITLE			Change Addition
N <sup>4</sup>	IME						52 NAME			
	REE1 ADDRESS						5 3 STREET			
	1Y - S1 - ZIP				LJ DELE	TC	54 CITY-S	ST - 1	ZIP	El Obsession El Address
	ILF MAC				DELE	.10	6. 1 TITLE			Change Addition
	ME REET ADDRESS						62 NAME 63 STREET	חגז	nnpree	
	TY-SI-ZIP						64 CHTY-S			
	4. I do hereby o						ed and doe	sr	not qualify for	the exemption stated in Section 119.07(3)(k), Florida Statutes. I further
	certify that the oath; that I a	ie informat m an offici	ion indicated on er or director of t	this annual rep the corporation	ort or suppleme	ntal annual r or trustee en	report is tru npowered t	Je	and accurate	e and that my signature shall have the same legal effect as if made under report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: SIGNATURE and Typed on Printed Name of Syming Offices on Director

14/26/96 (205) 633-969