

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

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95 JAN 20 PM 2:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # K70482

(0)

1. Corporation Name

HAMPTON INVESTMENTS, INC.

Principal Place of Business

C/O AMADA LOPEZ CANTERA
1036 S.W. 1ST ST.
MIAMI FL 33130

Mailing Address

1036 SW 1 STR
MIAMI FL 33130
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/06/1989

3a. Date of Last Report

04/22/1994

2. Principal Place of Business

21 1036 S.W. 1 ST

2a. Mailing Address

25 Suite, Apt. #, etc.

4. FEI Number

65-0146433

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

9. Name and Address of Current Registered Agent

FLORIDA ANNUAL REPORT SERVICES
CANTERA ASSOCIATES, INC
1036 SW 1 STR
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name

FLORIDA ANNUAL REPORT SERVICES, INC.

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

1036 S.W. 1 ST.

83

84 City

MIAMI

FL

85

Zip Code
33130

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, type or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan 17/95

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	CANTERA, AMADA LOPEZ
STREET ADDRESS	1036 S.W. 1ST ST.
CITY-ST-ZIP	MIAMI FL
TITLE	D
NAME	CANTERA, AMADA LOPEZ
STREET ADDRESS	1036 S.W. 1ST ST.
CITY-ST-ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	200001390262
1.4 CITY-ST-ZIP	-01/26/95--01058--011
2.1 TITLE	*****200.00 ☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	200001390262
2.4 CITY-ST-ZIP	-01/26/95--01058--023
3.1 TITLE	*****8.75 ☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 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 110.07(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: *Amada Lopez* PRES./SEC./TREAS.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/95

Daytime Phone #