

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # K89762 (4)
1. Corporation Name
CORDOBA PRODUCTIONS CORP.

95 FEB -2 PM 2:12

Principal Place of Business
2100 CORAL WAY
#604
MIAMI FL 33145
US

Mailing Address
2100 CORAL WAY
#604
MIAMI FL 33145
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/22/1989 3a. Date of Last Report 04/21/1994
4. FEI Number 65-0122800 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 2a. Mailing Address
21 2100 Coral Way - 604 26 2100 CORAL WAY
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 #604 27 #604
City & State City & State
23 MIAMI FL 28 MIAMI FL
Zip Country Zip Country
24 33145 25 USA 29 33145 30 US

9. Name and Address of Current Registered Agent
CORDOBA, ENRIQUE
917 MEDIANA AVE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name CORDOBA, ENRIQUE
82 Street Address (P.O. Box Number is Not Acceptable) 2610 S.W. 5 AVE.
83
84 City MIAMI FL 85 Zip Code 33129

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 ENRIQUE CORDOBA

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	CORDOBA, ENRIQUE
STREET ADDRESS	917 MEDINA AVE
CITY - ST - ZIP	CORAL GABLES FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
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	CORDOBA, ENRIQUE	
1.3 STREET ADDRESS	2610 S.W. 5 AVE	
1.4 CITY - ST - ZIP	MIAMI FL. 33129	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE		☐ 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 am hereby certifying that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 applicable.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

1/16/95 305)856 2566

(System 1/2/95)