

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L23476 (9)

1. Corporation Name

BASIC INDUSTRIES OF FLORIDA, INC.



Principal Place of Business

**7800 N W 34TH STREET
SUITE 100
MIAMI FL 33122**

Mailing Address

**7800 N W 34TH STREET
SUITE 100
MIAMI FL 33122**

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

**RIVERA, JOSUE
7800 N W 34TH ST
SUITE 100
MIAMI FL 33122**

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 of person making change (if not the registered agent)

Signature of Agent (if not the registered agent)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	RIVERA, HELI	
STREET ADDRESS	7800 N W 34TH ST #100	
CITY-ST-ZIP	MIAMI FL	
TITLE	VD	☐ DELETE
NAME	RIVERA, JOSUE	
STREET ADDRESS	7800 N W 34TH ST #100	
CITY-ST-ZIP	MIAMI FL	
TITLE	ASD	☐ DELETE
NAME	RIVERA, LOUISE	
STREET ADDRESS	7800 N W 34TH ST #100	
CITY-ST-ZIP	MIAMI FL	
TITLE	ST	☐ DELETE
NAME	CRESPO, ANGEL, A	
STREET ADDRESS	GPO BOX 70118	
CITY-ST-ZIP	SAN JUAN PR	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

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 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 attached sheet with an address.

SIGNATURE: Angel A. Crespo - Secretary/Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-06-96

Date

Digitally Signed by

CR2E034 (12/95)