

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 # L32613 (6)

1. Corporation Name

M.A. HUERTA & COMPANY



Principal Place of Business

400 SW 107TH AVENUE
404
MIAMI FL 33174

Mailing Address

400 SW 107TH AVENUE
404
MIAMI FL 33174

3. Date Incorporated or Qualified
11/24/1989

3a. Date of Last Report
10/20/1995

4. FEI Number
65-0197844

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

21 400 SW 107th Ave.

26 400 SW 107th Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 308

27 Suite 308

City & State

City & State

23 Miami, FL

28 Miami FL

Zip

Zip

24 33174

29 33174

Country

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUERTA, MANUEL A JR
400 SW 107TH AVENUE
404
MIAMI FL 33174

81 Name Huerta, Manuel A JR

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

400 SW 107th Ave.

83 Suite 308

84 City Miami

FL

85 Zip Code 33174

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 Officer or Director

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD
STREET ADDRESS HUERTA, MANUEL A JR
CITY - ST - ZIP 3531 SW 136 COURT
MIAMI FL

TITLE ☐ DELETE

NAME D
STREET ADDRESS HUERTA, MANUEL A SR
CITY - ST - ZIP 11336 SW 75 TERRACE
MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

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

1.4 CITY - ST - ZIP

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 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)