

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 # L35921 (0)

1. Corporation Name

OPTIMA CORPORATION



Principal Place of Business

Mailing Address

5370 SE 144 AVE
SUITE 301
MIAMI FL 33175
US

5370 SW 144 AVE
SUITE 301
MIAMI FL 33175
US

3. Date Incorporated or Qualified
12/13/1989

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 15427 S.W. 54 ST

26 15427 S.W. 54 ST.

4. FEI Number

65-0164791

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23 MIAMI FL

28 MIAMI FL

Zip Country

Zip Country

24 33185

25

29 33185

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RODRIGUEZ, FLORENTINO G.
5370 SW 144 AVE
MIAMI FL 33175

81 Name

RODRIGUEZ, FLORENTINO G.

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

15427 S.W. 54 ST.

83

84 City

MIAMI

FL

85 Zip Code

33185

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 607.0605, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/10/96

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME RODRIGUEZ, OCTAVIO
STREET ADDRESS 14376 S.W. 98TH TERRACE
CITY - ST - ZIP MIAMI FL

TITLE V ☐ DELETE

NAME RODRIGUEZ, FLORENTINO G.
STREET ADDRESS 5370 SW 144 AVE
CITY - ST - ZIP MIAMI FL

TITLE ST ☐ DELETE

NAME HALLETT, ELLIS ARCHER
STREET ADDRESS 14376 S.W. 98TH TERRACE
CITY - ST - ZIP 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME RODRIGUEZ, OCTAVIO
1.3 STREET ADDRESS 9241 S.W. 212 TERR.
1.4 CITY - ST - ZIP MIAMI FL 33189

2.1 TITLE V ☒ Change ☐ Addition

2.2 NAME RODRIGUEZ, FLORENTINO
2.3 STREET ADDRESS 15427 S.W. 54 ST.
2.4 CITY - ST - ZIP MIAMI FL 33185

3.1 TITLE ST ☒ Change ☐ Addition

3.2 NAME HALLETT, ELLIS ARCHER
3.3 STREET ADDRESS 10691 S.W. 88 ST.
3.4 CITY - ST - ZIP MIAMI FL 33176

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 on an attachment with an address.

SIGNATURE:

F. G. RODRIGUEZ

4/10/96

(305) 225-8593

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)