

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 # L38295 (6)

1. Corporation Name

A T & I SERVICES, INC.



Principal Place of Business

2460 SW 137TH AVE  
SUITE 241  
MIAMI FL 33175

Mailing Address

2460 SW 137TH AVE  
SUITE 241  
MIAMI FL 33175

3. Date Incorporated or Qualified  
12/19/1989

3a. Date of Last Report  
01/25/1995

2. Principal Place of Business

2a. Mailing Address

21 2450 SW 137 AVE

26 2450 SW 137 AVE

4. FEI Number  
65-0166668

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 # 207

27 # 207

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

City & State

City & State

23 MIAMI FL

28 MIAMI FL

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

24 Zip 33175 25 Country USA

29 Zip 33175 30 Country USA

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARONIEL, ROBERTO  
2460 SW 137TH AVE  
SUITE 241  
MIAMI FL 33175

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, typed or printed name of registered agent (and the corporation)

(NOTE: Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD ☐ DELETE

NAME BARONIEL, ROBERTO  
STREET ADDRESS 2460 SW 137TH AVE #241  
CITY-ST-ZIP MIAMI FL

TITLE VD ☐ DELETE

NAME BARONIEL, ESTHER M.  
STREET ADDRESS 2460 SW 137TH AVE #241  
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

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

12 NAME  
13 STREET ADDRESS 2450 SW 137 AVE # 207  
14 CITY-ST-ZIP MIAMI FL 33175

2.1 TITLE ☒ Change ☐ Addition

22 NAME  
23 STREET ADDRESS 2450 SW 137 AVE # 207  
24 CITY-ST-ZIP MIAMI FL 33175

3.1 TITLE ☐ Change ☐ Addition

32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME  
63 STREET ADDRESS  
64 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERTO BARONIEL

4-15-96

(305) 220-9886

Date

Telephone #

CR2E034 (12/95)