

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L42483 (2)

1. Corporation Name

BORDER ENTERPRISES ONSHORE, INC.

2. Principal Place of Business

Mailing Address

1112 Weston Rd.
#168
Weston, FL 33326

1112 Weston Rd.
#168
Weston, FL 33326

3. Date Incorporated or Qualified
1/12/1990

3a. Date of Last Report
1/23/96

21 1112 Weston Rd.

26 1112 Weston Rd.

4. FEI Number
65-0166048

Applied For
Not Applicable

22 168

27 168

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

23 Weston, FL

28 Weston, FL

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

24 33326 25 USA

29 33326 30 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

Reboredo, Gaston Jr.
1112 Weston Rd. #168
Weston, FL 33326

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

GASTON REBOREDO JR.

2-21-97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D,P,T	☐ DELETE
NAME	Reboredo Jr., Gaston	
STREET ADDRESS	340 Minorca Ave. # 7	
CITY-STATE-ZIP	Coral Gables, FL 33146	
TITLE	D,VP,S	☐ DELETE
NAME	Reboredo F., Gaston	
STREET ADDRESS	340 Minorca Ave. #7	
CITY-STATE-ZIP	Coral Gables, FL 33134	
TITLE	D,VP	☐ DELETE
NAME	Reboredo, Marina	
STREET ADDRESS	340 Minorca Ave. #7	
CITY-STATE-ZIP	Coral Gables, FL 33134	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

1.1 TITLE	D,P,T	☒ Change ☐ Addition
1.2 NAME	Reboredo Jr., Gaston	
1.3 STREET ADDRESS	1107 Aduana Ave.	
1.4 CITY-STATE-ZIP	Coral Gables, FL 33146	
2.1 TITLE	D,VP,S	☒ Change ☐ Addition
2.2 NAME	Reboredo F., Gaston	
2.3 STREET ADDRESS	2501 Brickell Ave. Apt. 701	
2.4 CITY-STATE-ZIP	Miami, FL 33129	
3.1 TITLE	D,VP	☒ Change ☐ Addition
3.2 NAME	Reboredo, Marina	
3.3 STREET ADDRESS	2501 Brickell Ave. Apt. 701	
3.4 CITY-STATE-ZIP	Miami, FL 33129	
4.1 TITLE	Assistant Vice-President	☐ Change ☒ Addition
4.2 NAME	Reboredo, Rebeca	
4.3 STREET ADDRESS	1107 Aduana Ave.	
4.4 CITY-STATE-ZIP	Coral Gables, FL 33146	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6.1 TITLE		☐ Change ☒ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is stated 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:

GASTON REBOREDO JR.

Date

Daytime Phone #

CR2E034 (9/96)