FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

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

APPROVED
AND
FILED

'95 MAR -6 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L64503 (0)

1. Corporation Name
PEXACO INTERNATIONAL CORP.

Principal Place of Business
4967 SW 75 AVE
MIAMI FL 33158-1550
US

Mailing Address
4967 SW 75 AVE
MIAMI FL 33158-1550
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/19/1990
3a. Date of Last Report: 02/07/1994

2. Principal Place of Business
21 8880 N.W. 18 TERR.
22 Suite, Apt. #, etc.
23 City & State: MIAMI, FL
24 Zip: 33172-2623
25 Country: USA

2a. Mailing Address
26 8880 NW 18 TERRACE
27 Suite, Apt. #, etc.
28 City & State: MIAMI, FL
29 Zip: 33172-2623
30 Country: USA

4. FEI Number: 65-0209970 ☐ 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

9. Name and Address of Current Registered Agent

ANIDO, MARTA
13392 S.W. 103 PLACE
MIAMI FL 33176

10. Name and Address of New Registered Agent
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
DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	GRIFOLS, VICTOR
STREET ADDRESS	08150 PARETS DEL VALLES
CITY-ST-ZIP	BARCELONA, SPAIN
TITLE	V
NAME	RICH, GREGORY G.
STREET ADDRESS	5555 VALLEY BOULEVARD
CITY-ST-ZIP	LOS ANGELES CA
TITLE	ST
NAME	ANIDO, MARTA F.
STREET ADDRESS	13392 S.W. 103RD PLACE
CITY-ST-ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		☐ Change ☐ Addition
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I 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)(i), 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: Marta D Anido
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-95 305-667-3500
DATE DAYTIME PHONE