

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

DOCUMENT # L68286

(8)

1. Corporation Name

QUIMO INTERNATIONAL, CORP.

Principal Place of Business

18000 NW 68TH AVE  
APT 301  
MIAMI FL 33015  
US

Mailing Address

18000 NW 68TH AVE  
APT 301  
MIAMI FL 33015  
US

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

NORENO, CONSUELO  
18000 NW 68TH AVE  
#301  
MIAMI FL 33015

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Numbers 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 this appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of Secretary of State (Print Name and Title)

(Date)

12. OFFICERS AND DIRECTORS

12a

NAME

STREET ADDRESS

CITY, ST, ZIP

DPT  
MORENO, CONSUELO  
18000 NW 68TH AVE #301  
MIAMI FL

12b

NAME

STREET ADDRESS

CITY, ST, ZIP

DS  
MORENO, CONSUELO  
18000 NW 68TH AVE #301  
MIAMI FL

12c

NAME

STREET ADDRESS

CITY, ST, ZIP

DV  
GIRALDO, MARIA V  
18000 NW 68TH AVE #301  
MIAMI FL

12d

NAME

STREET ADDRESS

CITY, ST, ZIP

12e

NAME

STREET ADDRESS

CITY, ST, ZIP

12f

NAME

STREET ADDRESS

CITY, ST, ZIP

12g

NAME

STREET ADDRESS

CITY, ST, ZIP

12h

NAME

STREET ADDRESS

CITY, ST, ZIP

12i

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS

13a

NAME

STREET ADDRESS

CITY, ST, ZIP

13b

NAME

STREET ADDRESS

CITY, ST, ZIP

13c

NAME

STREET ADDRESS

CITY, ST, ZIP

13d

NAME

STREET ADDRESS

CITY, ST, ZIP

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NAME

STREET ADDRESS

CITY, ST, ZIP

13f

NAME

STREET ADDRESS

CITY, ST, ZIP

13g

NAME

STREET ADDRESS

CITY, ST, ZIP

13h

NAME

STREET ADDRESS

CITY, ST, ZIP

13i

NAME

STREET ADDRESS

CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 134.02(1)(b), Florida Statutes. I further certify that the information submitted 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, and do file this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report as required with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CONSUELO MORENO

95 MAY -1 AM 5:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

04/24/1990

3a. Date of Last Report

03/29/1994

4. FEI Number

65-0189190

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

05/01/95 (305) 819-9599