

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 10 PM 1:46

DOCUMENT # L74271

(2)

1. Corporation Name

PRIMOS, INC.

Principal Place of Business

Mailing Address

C/O PENINSULA REGISTERED AGENTS, INC.
200 S.E. FIRST ST. PENTHOUSE
MIAMI FL 33131

C/O PENINSULA REGISTERED AGENTS, INC.
200 S.E. FIRST ST. PENTHOUSE
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/17/1990	3a. Date of Last Report 04/28/1994
4. FEI Number 65-0195846	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	

2. Principal Place of Business 21 200 S. Biscayne Blvd. Suite, Apt. #, etc. 22 Ste 4800 City & State 23 Zip 24	2a. Mailing Address 26 200 S. Biscayne Blvd. Suite, Apt. #, etc. 27 Ste 4800 City & State 28 Zip 29
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9. Name and Address of Current Registered Agent

PENINSULA REGISTERED AGENTS INC.
PENTHOUSE, ATCO FINANCIAL CENTER --
--200 S.E. FIRST STREET-----
MIAMI FL 33131

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	200 S. Biscayne Blvd.
83 Ste 4800	
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 title if applicable

(If SE, Registered Agent signature required when filing report)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	BERNAL, LEONARDO	12 NAME	
STREET ADDRESS	% 200 SE FIRST ST (PH) --	13 STREET ADDRESS	200 S. Biscayne Blvd. (4800)
CITY - ST - ZIP	MIAMI FL	14 CITY - ST - ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	ALVARADO, LUIS FERNANDO	22 NAME	
STREET ADDRESS	% 200 SE FIRST ST (PH) --	23 STREET ADDRESS	200 S. Biscayne Blvd. (4800)
CITY - ST - ZIP	MIAMI FL	24 CITY - ST - ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	BUILES, MARCELA	32 NAME	
STREET ADDRESS	% 200 SE FIRST ST (PH) --	33 STREET ADDRESS	200 S. Biscayne Blvd. (4800)
CITY - ST - ZIP	MIAMI FL	34 CITY - ST - ZIP	
TITLE	P	41 TITLE	☐ Change ☐ Addition
NAME	DE ANGULO, ALFREDO	42 NAME	
STREET ADDRESS	C/O 200 SE FIRST ST PH --	43 STREET ADDRESS	200 S. Biscayne Blvd. (4800)
CITY - ST - ZIP	MIAMI FL	44 CITY - ST - ZIP	
TITLE	T	51 TITLE	☐ Change ☐ Addition
NAME	BERNAL, LEONARDO	52 NAME	
STREET ADDRESS	C/O 200 SE FIRST ST PH --	53 STREET ADDRESS	200 S. Biscayne Blvd. (4800)
CITY - ST - ZIP	MIAMI FL	54 CITY - ST - ZIP	
TITLE	S	61 TITLE	☐ Change ☐ Addition
NAME	BUILES, MARCELA	62 NAME	
STREET ADDRESS	C/O 200 SE 1ST ST PH --	63 STREET ADDRESS	200 S. Biscayne Blvd. (4800)
CITY - ST - ZIP	MIAMI FL	64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntary, true and correct and is not required for the exemptions stated in Section 199.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplement is true and correct 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 of the corporation; and that my signature is required by Chapter 687, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with this filing.

SIGNATURE: Alfredo De Angulo

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

2/6/95

(305) 477-8083