

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **L89764** (9)

1. Corporation Name
HEUTE, INC.



Principal Place of Business

**520 BRICKELL KEY DR.
APARTMENT A PH11
MIAMI FL 33131
US**

Mailing Address

**520 BRICKELL KEY DR.
APT. PH11
MIAMI FL 33131
US**

3. Date Incorporated or Qualified
07/30/1990

3a. Date of Last Report
01/20/1995

4. FEI Number
NOT APPLICABLE

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. Subj. Apt. #, etc.

22. City & State

23. Zip Country

24. 25.

2a. Mailing Address

26. Subj. Apt. #, etc.

27. City & State

28. Zip Country

29. 30.

9. Name and Address of Current Registered Agent

**KLINE, KEVIN F.
C/O KLINE, MOORE, & KLEIN, P.A.
2665 S BAYSHORE DR. #903
COCONUT GROVE FL 33133**

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 607.0902 and 607.1502, 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 607.0502, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Officer/Director)

(Signature of Registered Agent or Officer/Director)

(Date)

12. OFFICERS AND DIRECTORS

1. PD
NAME **DE MORAES, CELSO BOTELHO**
STREET ADDRESS **520 BRICKELL AVE #A-PH11**
CITY, ST, ZIP **MIAMI FL**

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY, ST, ZIP

NAME

STREET ADDRESS

CITY, ST, ZIP

NAME

STREET ADDRESS

CITY, ST, ZIP

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CITY, ST, ZIP

NAME

STREET ADDRESS

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

CELSON BOTELHO DE MORAES

1-22-96 (305) 372-3888

Date:
Telephone Number:

CR2E034 (12/95)