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PROFIT CORPORATION **ANNUAL REPORT**

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

CORK SPECIALTIES, INC.

FILED

Apr 18 1997 8:00am

Secretary of State

Principal Place of Business 1454 NW 78 AVENUE MIAMI FL 33126		Mailing Addre	Mailing Address 1454 NW 78 AVENUE MIAMI FL 33126-1608			f 1985 seit ins tible singe inter and interest interest interest and				
						3. Date Incorporated or 03/06/1985	Qualified 3	04/18/1996	•	
2. Principal P	lace of Business	28. Mailing Ad	Idress			4. FEI Number			Applied For	
21		26	26			59-2501343 Not A			Not Applicable	
Suite Apt.	#, etc.	Suite, Apt	#, etc.			5. Certificate of Status [esired [4	Additional	
22		27				5. Commonte of outros t		Fee	Required	
City & Stat	е	City & Stat	City & State			6. Election Campaign Fi	· -			
23		28	····	-		Trust Fund Contribution			d to Fees	
Zip	Country	Zip Titi		Country	y	B. This corporation has	liability for intai	ngible tax unde es 🔣 No	rs. 199.032,	
24	25	29	30	l		Florida Statutes 10. Name and Address				
	9. Name and Address of C	urrent Registered Agen		81	Name	IV. Name and Address	Oliton negla	ered Agent		
	JEROA, RAFAEL			Į.	Ivanic					
	S.W. 23RD TERRACE			82	Street Add	fress (P.O. Box Number is No	t Acceptable)			
MIAI	MI FL 33145			83	ļ			·		
				"						
				84	City			FL 85 Z	p Code	
44 5	to the exercisions of Cool and Co	7 0000 and 607 1000 U	orida Statutos	Uso obes	io named cor	poration cultimite this stateme	nt for the purp		its registereri	
office or r agent. I a	to the provisions of Sections 60 registered agent, or both, in the imfamiliar with, and accept the	State of Horida Such ch obligations of, Section 60	iange was auth 07.0505, Florida	orized b a Statute	y the corpora	ation's board of directors. The	reby accept th	ne appointment	ás registered	
,SIGNATURE	Signature, typed or printed name of register	west are at and taked semilarable	(NOTE 16	owlered Ac	ent signature regu	lired when reinstating)		DATE		
12.		RS AND DIRECTORS	(Hext vie	13.	,	ADDITIONS/CHANGES			ORS IN 12	
TITLE	DP .		DELETE	1.1 1111.1				☐ Chang	e Addition	
NAME	FIGUEROA, RAFAEL			1.2 NAME						
STREET ADDRESS	1740 S.W. 23RD TERR			1.3 STREE	T ADDRESS					
CITY-ST-ZIP	MIAMI FL			1.4 CITY-	ST-ZIP					
TITLE	D		DELETE	2.1 11715				Chang	e Addition	
NAME	FIGUEROA, MERCEDES			2.2 NAME						
STREET ADDRESS	1740 S.W. 23RD TERR			2.3 STREE	FADDRESS					
CITY-ST-ZIP	MIAMI FL			2.4 OITY	- ST - ZIP					
TITLE	D		DELETE	3.1 TITLE				☐ Chang	e 🔲 Addition	
NAME	BARRANCO, ORLANDO			3.2 NAME						
STREET ADDRESS	8201 S.W. 91ST ST.			3.3 STREE	L ADDRESS					
CITY-ST-ZIP	MIAMI FL			3.4. C(1)	-S1-ZIP					
TITLE	D		DELETE	4.1 1HLF				Chang	e 🔲 Addition	
NAME	BARRANCO, TRINIDAD			4. 2 NAMI						
STREET ADDRESS	8201 S.W. 91ST ST.			4.3 STREE	T ADDRESS					
CITY-\$T-ZIP	MIAMI FL			4.4 C(TY-	S1 - 7(F)					
TITLE			DELETE	5.1 TITLE				Chang	e Addition	
NAME				5.2 NAME						
STREET ADDRESS				53 STREE	1 ADDRESS					
CITY-ST-ZIP				5 4 CITY-	SI-710				···	
TITLE			DELETE	6.1 INLE				Chang	e 🔲 Addition	
NAME				6.2 NAME						
STREET ADDRESS				6.3 STHEE	1 ADDRESS					
CITY-ST-7(P				6.4 CHY-	\$1 - 7IP					

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 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 trusted 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 adolps.