

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **M22169** (0)
1. Corporation Name
EL RODEO INVESTMENT CORPORATION



Principal Place of Business

Mailing Address

% HERNANDO GUTIERREZ V.
10500 S.W. 67 AVE.
MIAMI FL 33156

% HERNANDO GUTIERREZ V.
10500 S.W. 67 AVE.
MIAMI FL 33156

3. Date Incorporated or Qualified

10/18/1985

3a. Date of Last Report

03/07/1995

4. FEI Number

59-2623574

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

2a. Mailing Address

21

26

Suite, Apt #, etc.

Suite, Apt #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

V. GUTIERREZ, HERNANDO
10500 S.W. 67 AVE.
MIAMI FL 33156

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE

NAME V. GUTIERREZ, HERNANDO
STREET ADDRESS 10500 S.W. 67 AVE.
CITY-ST-ZIP MIAMI FL

11 TITLE ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME GUTIERREZ, PILAR
STREET ADDRESS 10500 S.W. 67 AVE.
CITY-ST-ZIP MIAMI FL

12 NAME ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME GUTIERREZ, ALICIA
STREET ADDRESS 10500 S.W. 67 AVE.
CITY-ST-ZIP MIAMI FL

13 STREET ADDRESS ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME GUTIERREZ, ANA BEATRIZ
STREET ADDRESS 10500 S.W. 67 AVE.
CITY-ST-ZIP MIAMI FL

14 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D ☐ DELETE

NAME GUTIERREZ, MARCELA
STREET ADDRESS 10500 S.W. 67 AVE.
CITY-ST-ZIP MIAMI FL

2 NAME ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

3 STREET ADDRESS ☐ Change ☐ Addition

4 CITY-ST-ZIP
5 TITLE
6 NAME
7 STREET ADDRESS
8 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 617, 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

Date

Day, Month, Year

CR2E034 (3/96)