

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 31 AM 11:10

DOCUMENT # **M27239**

(6)

1. Corporation Name

MONTES DE OCA PLASTER CORPORATION

Principal Place of Business

**10501 S.W. 48 STREET
MIAMI FL 33165**

Mailing Address

**10501 S.W. 48 STREET
MIAMI FL 33165**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

02/11/1986

3a. Date of Last Report

04/13/1994

4. FEI Number

59-2742217

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

Suite, Apt. #, etc.

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

**PEREZ, ARMANDO
2390 N.W. 7 ST.
MIAMI FL 33125**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

10. Name and Address of New Registered Agent

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MONTES DE OCA, SERGIO
STREET ADDRESS	10501 S.W. 48 STREET
CITY, ST, ZIP	MIAMI FL
TITLE	STD
NAME	DE OCA LOURDES, MONTES
STREET ADDRESS	10501 S.W. 48 STREET
CITY, ST, ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE	☐ Change ☐ Addition
12. NAME	
13. STREET ADDRESS	
14. CITY, ST, ZIP	
21. TITLE	☐ Change ☐ Addition
22. NAME	
23. STREET ADDRESS	
24. CITY, ST, ZIP	
31. TITLE	☐ Change ☐ Addition
32. NAME	
33. STREET ADDRESS	
34. CITY, ST, ZIP	
41. TITLE	☐ Change ☐ Addition
42. NAME	
43. STREET ADDRESS	
44. CITY, ST, ZIP	
51. TITLE	☐ Change ☐ Addition
52. NAME	
53. STREET ADDRESS	
54. CITY, ST, ZIP	
61. TITLE	☐ Change ☐ Addition
62. NAME	
63. STREET ADDRESS	
64. 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 110.02(3)(b), 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 407, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sergio Montes de Oca
SERGIO MONTES DE OCA

4/30/95 (301) 57-6340