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2-28-95 B-1652 XC

ANNUAL REPORT

1995



STATE OF FLORIDA
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 28 PM 4:22

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(3)

SALGADO'S CORPORATION

DO NOT WRITE IN THIS SPACE.

1. Principal Place of Business C/O ELIO O. SALGADO 2510 SW 23 TERRACE MIAMI FL 33145		Mailing Address C/O ELIO O. SALGADO 2510 SW 23 TERRACE MIAMI FL 33145	
2. Principal Place of Business 21		2a. Mailing Address 26	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27	
City & State 23		City & State 28	
Country 24	Country 25	Zip 29	Country 30

3. Date Incorporated or Qualified 07/30/1986	3a. Date of Last Report 10/19/1994
4. FEI Number 59-2697405	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	

9. Name and Address of Current Registered Agent SALGADO, ELIO O. 1198 SW 17TH AVE MIAMI FL 33129		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	
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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 _____ DATE _____
(Signature of Registered Agent required when resigning) (Signature of Registered Agent required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME PTD SALGADO, ELIO O. 2510 SW 23 TERRACE MIAMI FL 33145		1.1 TITLE ☐ Change ☐ Add New	
NAME VSD SALGADO, AYDA 2510 SW 23 TERRACE MIAMI FL 33145		1.2 NAME	
		1.3 STREET ADDRESS	
		1.4 CITY-ST-ZIP	
		2.1 TITLE ☐ Change ☐ Add New	
		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
		3.1 TITLE ☐ Change ☐ Add New	
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		4.1 TITLE ☐ Change ☐ Add New	
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE ☐ Change ☐ Add New	
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE ☐ Change ☐ Add New	
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 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 110.07(3)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the receiver or transfer agent named to succeed this report as required by Chapter 607, Florida Statutes, and that my name appears on the list of officers or directors of the corporation as an attachment with an address.

SIGNATURE:

Elio O. Salgado Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Elio O. Salgado Jr.

2-20-95

555-7304
(305) 855-6418
Exempt Officer