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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

M48558

(4)

**DESERT CORPORATION** 

12190 SW 99TH ST	12190 SW 99TH ST
Principal Place of Business	Mailing Address

<u> </u>
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	14444 Pt 00400		MIAMI FL 33186	3					
	MIAMI FL 33186		<b>J </b>				3. Date incorporated or Qualified	1	of Last Report
							03/18/1987	0	<u>4/24/1995</u>
			2a. Maing Addres				4. FEI Number		Applied For
2	Principal Place of Busin	eas	26				59-2784847	,	Not Applicable
21	Suite. Apt. #, etc		Suite, Apt. #, 6	::IG.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
22	Orty & State		City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees
23			28		Unitry		8. This corporation has liability for	intangible ta	
	Ζiρ	Country	Ζφ [20]	30	Uritiy		Florida Statutes Yes	☐ No	
24		25	29	1301	Τ		10. Name and Address of New F	legistered	Agent
	9. Nam	e and Address of Cu	irrent Registered Agent		81	Name			
	PEQUINO OMAS				82	Street Addr	ess (P.O. Box Number is Not Acceptat	ole)	
i	12190 SW 99TH				83				
	MAMI FL 33186				84	, ,		FL	85 Zip Code
					٠.ــــــــــــــــــــــــــــــــــــ	L	ation cultimits this statement for the pu	rpose of ch	anging its registered office

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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of. Section 607,0505. Florida Statutes

	patre, ta et ar pated sale i ne de a a pet e di OFFICERS AND D	RECTORS	forgetimed April Signature regime 1.  13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
LE T	PD	DELETE	1 1 T LLE	Onlings Nation
ME .	PEQUENO, TOMAS		1.2 NAME	
REET ADDRESS	12190 SW 99TH ST.		1.3 STREET ADORESS	
TY-S1-ZIP	MIAMI FL		14 CiTY - ST ZiF	Change Addition
LF	VST	DELETE	2 1101€	C grounds C reserve
ME	PEQUENO, GLADYS		2.2 NAM's	
REET ADDRESS	12190 SW 99TH ST.		2.3 STREET ADDRESS	
reel Adoness	MIAMI FL		2.4 CILY - ST ZIP	Change Additi
(F	D	☐ DELETE	3 1 THEF	County County
ME	PEQUENO, GLADYS		3.2 NAME	
REET ADDRESS	12190 SW 99TH ST.		3.3 STREET ADDRESS	
TY-S!-7:P	MIAMI FL		3.4 C/TY - S1 - Z/P	Change Addit
ILE	MICHI I L	DELETE	4 1 TITLE	
AMÉ			4 2 NAME	
REET ADDRESS			4.3 STREET ADDRESS	
Y-ST-ZIP			4.4 CHY - ST - ZIP	Change Add
TLF		DELE IE	5 17005	Change L nas
ME.			52 NAME	
ireet address			5.3 STREET ADDRESS	
ITY-S!-ZIP			5 4 CiTY - ST - ZIF	Change Addi
TLE		DELETE	6 1 TOUE	
AME			6.2 NAME	
IREET ADDRESS			€ 3 STREET ADDRESS.	
CITY - \$1 - ZIP			6.4 CHY+S1+Z12	for the exemption stated in Section 119 07(3)(k), Florida Statutes, I furth

14. It do hereby certify that the information surpried 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 animal report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that if 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 changes, or on an attachment with an address

SIGNATURE:

SIGNATURE:

SIGNATURE

Description of the original of the printer of the corporation of 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 changes, or on an attachment with an address.