FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham annual report Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** BONZO ENTERPRISES, INC. Principa' Place of Business Malling Address 2658 S.W. 37 AVE. 2658 S.W. 37 AVE. MIAMI FL 33133 MIAMI FL 33133 3a. Date of Last Report 3. Date Incorporated or Qualified 04/28/1995 09/30/1987 Applied For 4. FLI Number 2a. Mailing Address 2. Principal Place of Business 65-0048023 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 Oity & State \$5.00 May Be City & State Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country 2m¥ Yes ☐ No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FERNANDEZ, RAIMUNDO Street Address (F.O. Box Number is Not Acceptable) R2 2658 S.W. 37 AVE. 83 **MIAMI FL 33133** 85 Zip Code 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printled membro of registered agreed and little if applicable (NOTE: Pagistered Agent signature required which reinstating) CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. [] Change [] Addition ["| DELETE 1, 1 TULE TITLE FERNANDEZ, RAIMUNDO 1.2 NAME NAME 9370 SW 118 PL 1.3 STREET ADDRESS STREEL ADDRESS MIAMI FL 1.4 CITY - ST - ZIP Crty-S1-ZiP [] Addition [] Change ["] DELETE 2.1 TITLE TITLE QUEVEDO, DELIA M. 22 NAM: NAME 7141 SW 129 AVE., #8 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 24 CHY- \$1-ZIP CITY-S1-ZIP []] Change Addition TT DELETE 3 1 THEF TITLE FERNANDEZ, ALEXANDER 3.2 NAME NAME 9680 SW 103 AVE RD 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4 CiTY - \$1 - ZiP CITY-ST-ZIP [] Change [] DELLTE 4 1 111LF TITLE TD 4.2 NAME FERNANDEZ, DIEGO 4.3 STREET ADDRESS 561 W. 37 PL. STREET ADDRESS HIALEAH FL 4.4 CH1Y - S1 - ZIP CITY-ST-7IP Change Addition COLLETE 5 1 1111. TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP DITY-ST-ZP DELFTE Change Addition 6.1300 F THILE NAME STREET ADDRESS 6.4 CITY- \$1-71°

14. Too 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 early that I 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 changed, or on an allachiment with an address.

SIGNATURE:

ROWWARD Formander

**Distance Processing Office on Director Office Office on Director Office Office Office Office Office Office Office