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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M66884 (1)
1. Corporation Name DURATEL, INC.

Principal Place of Business 3927 SW 82 AVE 8165 SW 40TH STREET MIAMI FL 33155 US	Mailing Address 3927 SW 82 AVE 8165 SW 40TH STREET MIAMI FL 33155 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3927 SW 82nd AVE Suite, Apt. #, etc.	2a. Mailing Address 26 3927 SW 82nd AVE Suite, Apt. #, etc.
22 City & State 23 MIAMI, FL 33155	27 City & State 28 MIAMI, FL 33155
24 Country 25 USA	30 USA

3. Date Incorporated or Qualified 01/28/1988	3a. Date of Last Report 07/21/1994
4. FEI Number 65-0022797	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	
7. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent CONTEZ CERAK 8165 SW 40TH STREET MIAMI FL 33155	
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10. Name and Address of New Registered Agent	
81 Name RAMON LUIS IRIGOYEN ALITA PATTERSON	
82 Street Address (P.O. Box Number is not Acceptable) 3927 SW 82nd AVE.	
83	
84 City MIAMI	85 Zip Code FL 33155

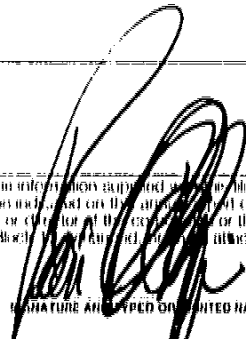
11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  **ALITA PATTERSON** 4-11-95
I am the Registered Agent for this corporation and accept the appointment.

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY, ST, ZIP	PD IRIGOYEN, RAMON LUIS, JR 8165 S.W. 74TH AVENUE MIAMI FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	DTS IRIGOYEN, ESTHER B 8165 SW 40TH STREET MIAMI FL
TITLE NAME STREET ADDRESS CITY, ST, ZIP	VPD IRIGOYEN, RAMON LUIS 8165 S.W., 40TH ST. MIAMI FL DELETE
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	
14 TITLE 15 NAME 16 STREET ADDRESS 17 CITY, ST, ZIP	☐ Change ☐ Addition
18 TITLE 19 NAME 20 STREET ADDRESS 21 CITY, ST, ZIP	☐ Change ☐ Addition
22 TITLE 23 NAME 24 STREET ADDRESS 25 CITY, ST, ZIP	☒ Change ☐ Addition
26 TITLE 27 NAME 28 STREET ADDRESS 29 CITY, ST, ZIP	☐ Change ☐ Addition
30 TITLE 31 NAME 32 STREET ADDRESS 33 CITY, ST, ZIP	☐ Change ☐ Addition
34 TITLE 35 NAME 36 STREET ADDRESS 37 CITY, ST, ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied in this report is voluntarily furnished and does not qualify for the exemption stated in Sections 110.07(1)(b), Florida Statutes. I further certify that the information is not based on the annual report or supplemental annual report as 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report and that I am attaching with my return.

SIGNATURE:  **ALITA PATTERSON**
I am the Registered Agent for this corporation and accept the appointment.

65-20-95