

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N41175 (3)**

1. Corporation Name

**PERUVIAN-AMERICAN CHAMBER OF COMMERCE, INC.**



Principal Place of Business

Mailing Address

**444 BRICKELL, SUITE M-126  
MIAMI FL 33131**

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MIAMI FL 33131**

3. Date Incorporated or Qualified <b>12/11/1990</b>	3a. Date of Last Report <b>06/12/1995</b>
4. FEI Number <b>65-0266513</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>AVILA, ALCIDES I., ESQUIRE 444 BRICKEL AVE M-126 MIAMI FL 33131</b>		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	<b>FL</b> 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer 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 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when resubstituting) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	NAME <b>ENRIQUE, ORIHUELA</b>	11 TITLE <b>PD</b>	12 NAME <b>FELIPE WOLL</b>
STREET ADDRESS <b>444 BRICKELL AVE., STE M-126</b>	CITY-ST-ZIP <b>MIAMI FL</b>	13 STREET ADDRESS <b>444 BRICKELL AVE STE M-126</b>	14 CITY-ST-ZIP <b>MIAMI FL</b>
TITLE <b>VD</b>	NAME <b>WOLL, FELIPE</b>	21 TITLE <b>VD</b>	22 NAME <b>UMBERTO CRIPPA</b>
STREET ADDRESS <b>444 BRICKELL AVE STE M-126</b>	CITY-ST-ZIP <b>MIAMI FL</b>	23 STREET ADDRESS <b>444 BRICKELL AVE STE M-126</b>	24 CITY-ST-ZIP <b>MIAMI FL</b>
TITLE <b>TD</b>	NAME <b>CRIPPA, UMBERTO</b>	31 TITLE <b>SD</b>	32 NAME <b>ERNESTO FERNANDEZ</b>
STREET ADDRESS <b>444 BRICKELL AVE STE M-126</b>	CITY-ST-ZIP <b>MIAMI FL</b>	33 STREET ADDRESS <b>444 BRICKELL AVE STE M-126</b>	34 CITY-ST-ZIP <b>MIAMI FL</b>
TITLE <b>C</b>	NAME <b>HUMBERTO, SPEZIANI</b>	41 TITLE <b>TD</b>	42 NAME <b>FRANCO CASTRO</b>
STREET ADDRESS <b>444 BRICKELL SUITE M126</b>	CITY-ST-ZIP <b>MIAMI FL</b>	43 STREET ADDRESS <b>444 BRICKELL AVE STE M-126</b>	44 CITY-ST-ZIP <b>MIAMI FL</b>
TITLE <b>SD</b>	NAME <b>WOLL, FELIPE</b>	51 TITLE	52 NAME
STREET ADDRESS <b>444 BRICKELL AVE., STE M-126</b>	CITY-ST-ZIP <b>MIAMI FL</b>	53 STREET ADDRESS	54 CITY-ST-ZIP
TITLE <b>SD</b>	NAME <b>WOLL, FELIPE</b>	61 TITLE	62 NAME
STREET ADDRESS <b>444 BRICKELL AVE STE M-126</b>	CITY-ST-ZIP <b>MIAMI FL</b>	63 STREET ADDRESS	64 CITY-ST-ZIP

14. I do 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: **X** *[Signature]* **PRESIDENT** **X** **3/18/96**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

CR2E037 (12/95)