

FILE NOW: FILING FEE AFTER MAY 1 IS \$105.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 9:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N45202

(1)

1. Corporation Name

GRACIA, FE Y AMOR, INC.

Principal Place of Business

460 W. 29TH STREET
HIALEAH FL 33012

Mailing Address

PO BOX 2643
HIALEAH FL 33012

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/19/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0284780

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. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HURTADO, JAIME B
1460 43RD PLACE
SUITE 204
HIALEAH FL 33012

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

J. B. Hurtado

JAIME B HURTADO

04-25-95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	HURTADO, JAIME B.
STREET ADDRESS	1460 W 43RD PLACE #204
CITY, ST, ZIP	HIALEAH FL
TITLE	T
NAME	HURTADO, DORA
STREET ADDRESS	1460 W. 43RD PLACE #204
CITY, ST, ZIP	HIALEAH FL
TITLE	S
NAME	REYES, BRENDA
STREET ADDRESS	145 S.W. 11TH ST. #1
CITY, ST, ZIP	MIAMI FL
TITLE	D
NAME	COLLAZOS, DULIA P
STREET ADDRESS	9380 FOUNTAINE BLUE BLV. #515
CITY, ST, ZIP	MIAMI FL 33172
TITLE	D
NAME	VALDEZ, ANTONIO V
STREET ADDRESS	7885 W. 29TH WAY #201
CITY, ST, ZIP	HIALEAH FL 33016
TITLE	D
NAME	REYES, JAMIE
STREET ADDRESS	2623 NW 24TH ST. #3
CITY, ST, ZIP	MIAMI FL 33142

11 TITLE	V	☒ Change ☐ Addition
12 NAME	HURTADO, JAIME B.	
13 STREET ADDRESS	1460 W. 43RD PL. #204	
14 CITY, ST, ZIP	HIALEAH, FL. 33012	☐ Change ☒ Addition
21 TITLE	D	
22 NAME	SANCHEZ, AMELIA	
23 STREET ADDRESS	492 E. 56TH STREET	
24 CITY, ST, ZIP	HIALEAH, FL. 33013	☒ Change ☐ Addition
31 TITLE	S	
32 NAME	NAIL, OLGA	
33 STREET ADDRESS	7905 W. 30TH COURT #205	
34 CITY, ST, ZIP	HIALEAH, FL. 33016	☒ Change ☐ Addition
41 TITLE	P	
42 NAME	NAIL, JOSE	
43 STREET ADDRESS	7905 W. 30TH COURT #205	
44 CITY, ST, ZIP	HIALEAH, FL. 33016	☒ Change ☐ Addition
51 TITLE	D	
52 NAME	MOREL, ALICIA	
53 STREET ADDRESS	6395 W. 22ND COURT #202	
54 CITY, ST, ZIP	HIALEAH, FL. 33016	☒ Change ☐ Addition
61 TITLE	D	
62 NAME	MOREL, NELSON	
63 STREET ADDRESS	6395 W. 22ND COURT # 202	
64 CITY, ST, ZIP	HIALEAH, FL. 33012	☒ Change ☐ Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.07(4)(b), 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 on an attachment with an address.

SIGNATURE:

J. B. Hurtado

(JAIME HURTADO)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-25-95

DATE

(305) 556-4479

TELEPHONE NUMBER