

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

MAY - 1 PM 9:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000001412 (6)

1. Corporation Name

CAMARA DE COMERCIO OBERO-AMERICANA, INC.

Principal Place of Business

Mailing Address

1430 S.W. 1ST ST.
SUITE 17
MIAMI FL 33135
US

1430 S.W. 1ST ST
SUITE 17
MIAMI FL 33135
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/29/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0433663

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOPEZ-BAENA, ANTHONY
1430 SW 1ST ST.
SUITE 17
MIAMI FL 33135

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

Signature of Registered Agent or Registered Agent and the Corporation

Signature of Registered Agent (signature required when submitting)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	C
NAME	LOPEZ-BAENA, ANTHONY
STREET ADDRESS	89 NW 48 PL.
CITY, ST, ZIP	MIAMI FL
TITLE	VC
NAME	SOSA, FRANK
STREET ADDRESS	1430 NW 7TH ST., #437
CITY, ST, ZIP	MIAMI FL
TITLE	P
NAME	LOPEZ-BAENA, ANNETTE
STREET ADDRESS	89 NW 48 PL.
CITY, ST, ZIP	MIAMI FL
TITLE	VD
NAME	PRATS, ERNESTO
STREET ADDRESS	257 NW 36 AVE.
CITY, ST, ZIP	DEERFIELD BCH. FL
TITLE	T
NAME	LOPEZ, AIDA
STREET ADDRESS	89 NW 48 PL.
CITY, ST, ZIP	MIAMI FL
TITLE	VT
NAME	ROSPIGLIOSI, FANNY
STREET ADDRESS	235 - 30TH ST.
CITY, ST, ZIP	MIAMI BCH. FL

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	☐ Change ☐ Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
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 110.03(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 on an attachment with an address.

SIGNATURE:

Anthony Lopez-Baena
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/95 - 305-649-586

Excluded From Fee