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FILED

May 19 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N95000000259 (0)

1. Corporation Name

MONUMENTO DE FE INTERNACIONAL, INC.

Principal Place of Business

Mailing Address

799 PALM AVENUE  
HIALEAH FL 33011799 PALM AVENUE  
HIALEAH FL 33010-43173. Date Incorporated or Qualified  
01/18/19953a. Date of Last Report  
05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City &amp; State

24 Zip 25 Country

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip 29 Country

4. FEI Number  
65-0557446Applied For  
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution ☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

GARCIA-BARBON, VICTORIO SR.  
799 PALM AVENUE  
HIALEAH FL 33011

10. Name and Address of New Registered Agent

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME GARCIA-BARBON, VICTORIO SR.  
STREET ADDRESS 2305 EAST 4TH AVENUE STE-203  
CITY-ST-ZIP HIALEAH FL 33010 ☐ DELETETITLE VD  
NAME DE CHOURIO, LUZ  
STREET ADDRESS 25 WEST 86TH STREET STE-6  
CITY-ST-ZIP HIALEAH FL 33010 ☐ DELETETITLE SD  
NAME DURAN, SILVIO  
STREET ADDRESS 799 PALM AVENUE  
CITY-ST-ZIP HIALEAH FL 33011 ☐ DELETETITLE TD  
NAME GARCIA-BARBON, CARMEN B  
STREET ADDRESS 2305 EAST 4TH AVENUE STE-203  
CITY-ST-ZIP HIALEAH FL 33010 ☐ DELETETITLE D  
NAME MARTINEZ, NIEVES  
STREET ADDRESS 501 EAST 14TH COURT  
CITY-ST-ZIP HIALEAH FL 33010 ☐ DELETETITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 2171 SW. 173rd. Terrace  
1.4 CITY-ST-ZIP Miramar, FL. 330292.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 3161 SW. 173rd. Terrace  
2.4 CITY-ST-ZIP Miramar FL 330293.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS 3171 SW. 173rd. Terrace  
4.4 CITY-ST-ZIP Miramar FL 330295.1 TITLE ☒ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS 11971 SW. 19th Street  
5.4 CITY-ST-ZIP Miramar FL 330256.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/29/97 (305) 885-6523  
Date Daytime Phone # 0022771

CR2E037 (9/96)