

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # N95000005111 (8)

1. Corporation Name

EXHORTACION OF FLAGLAMI CORP.



400001898914

-07/19/96--01007--040

\*\*\*61.25

Principal Place of Business

25 S.W. 38TH AVENUE  
MIAMI FL 33134

Mailing Address

25 S.W. 38TH AVENUE  
MIAMI FL 33134

3. Date Incorporated or Qualified  
10/30/1995

3a. Date of Last Report

4. FEI Number

☒ 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

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 SAME

26 SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State Miami FL

27 City & State Miami

24 Zip Country

25 DADE

29 33134

30 DADE

9. Name and Address of Current Registered Agent

URQUIOLA, ANGEL  
25 S.W. 38TH AVENUE  
MIAMI FL 33134

10. Name and Address of New Registered Agent

81 Name

ANGEL URQUIOLA

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

25 S.W. 38 AVE

83

84

City Miami DADE FL

85 Zip Code 33134

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

ANGEL URQUIOLA

(NOTE: Registered Agent signature required when reinstating)

6-11-96

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME URQUIOLA, ANGEL  
STREET ADDRESS 25 S.W. 38TH AVE.  
CITY-ST-ZIP MIAMI FL 33134

☐ DELETE

TITLE VTD  
NAME TARAFA, PEDRO H  
STREET ADDRESS 25 S.W. 38TH AVE.  
CITY-ST-ZIP MIAMI FL 33134

☐ DELETE

TITLE VD  
NAME DEESA, PAUL  
STREET ADDRESS 3941 S.W. 2ND TERRACE  
CITY-ST-ZIP MIAMI FL 33144

☐ DELETE

TITLE VD  
NAME AGRAMONTE, JOAQUIN  
STREET ADDRESS 4810 S.W. 5TH ST.  
CITY-ST-ZIP MIAMI FL 33144

☐ DELETE

TITLE SD  
NAME URQUIOLA, MARY  
STREET ADDRESS 25 S.W. 38TH AVE.  
CITY-ST-ZIP MIAMI FL 33134

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

NONE

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

NONE

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

NONE

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

NONE

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

NONE

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

7-18-96

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-11-96 (305) 446-3081

Date

Daytime Phone #

0006978

CR2E037 (3/96)