FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 06 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P31948

(3)

BOCACOS INC.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

Principal Place of Business Mailing Address							
JOHN IMMES 2400 MIAMI CE MIAMI FL 3313	ENTER STE 100	JOHN IMMES 2400 Miami Center Ste Miami Fl 33131	2400 MIAMI CENTER STE 100				
US		US			3. Date Incorporated or Qualified 11/28/1990 3a. Date of Lest Report 07/26/1996		
2. Principal P	hace of Business	2a. Mailing Address	2a. Mailing Address		4, FEI Number		pplied For
21		26	···		65-0227426		ot Applicable
Suite, Apt. #, etc. []		Suite, Apt. #, etc.	Suite, Apt. #, etc. [27]		5, Certificate of Status Desired		
City & Stat	·	City & State			6. Election Campaign Financing \$5.00 May Be		
3		28	28		Trust Fund Contribution Added to Fees		
Zip Country		Zιρ	h		8. This corporation has liability for intangible tax under s. 199.032,		
24	25 g. Name and Address of Curre	29	30		Florida Statutes Yes No 10. Name and Address of New Registered Agent		
OT (ant negistered Agent	81	Name	10, Name and Address of New H	igistered Agent	···
	CORPORATION SYSTEM O S. PINE ISLAND ROAD		80	Carrent Andrew	(D.C. Doubleshoe in high Association	L1-1	
	NTATION FL 33324		82 Street Add		dress (P.O. Box Number is Not Acceptable)		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		83				
			84	City		85 Zip	Code
		and the same of th			poration submits this statement for the	FL	
office or r	registered agent, or both, in the Sta on familiar with, and accept the obli	te of Florida. Such change was gations of, Section 607.0505, F	s authorized by t lorida Statutes.	the corporat	ion's board of directors. I hereby acce	pt the appointment as	; registered
12.	Bigneria: tree to protect come of registered a OFFICERS A	ND DIRECTORS	TE Hagistered Agent	a gnature requir	ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTOR	RS IN 12
TEUF	PD	DELETE	1.1 1IILE		ADDITIONO/OFFAMOLO TO OFF	Change	Addition
NAME	HERETH, HANNJOERG		1.2 NAME				
STREET ADDRESS	ONE SE THIRD AVE #1700		1.3 STREET ADDRESS				
City-S1-7iP	MIAMI FL	DE EE	1.4 CITY-ST-	ZIP			-
TITLE	L DELETE		2.1 11TLE			☐ Change	Addition
NAME STREET ADDRESS:			2.2 NAME	UDBESS			
Edity - ST- ZaP			2 3 STREET ADDRESS 2. 4 CITY-ST-ZIP				
TITLE	DELETE		3.1 TITLE	•		☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3 3 STREET A	DDRESS			
Cally - S1 - 7aP			3.4. CITY-ST	- ZIP		· · · · · · · · · · · · · · · · · · ·	
TITLE	L DELETE		4.1 TITLE			Change	Addition
NAME			4 2 NAME				
STREET ACCRESS			4 3 STHEET A				
OTY-ST-7IP DILE		DELETE	4.4 City-St- 51 Tifle	ZIP .		Change	Addition
NAME		La trettit	52 NAME			LJ Criange	AODINO!!
STREET ADDRESS			5 3 STREET A	ODBESS			
Catri-ST-ZIP			54 CITY-SI-				
Ditt	☐ DELETE		6 1 THLE			☐ Change	Addition
NAME			62 NAME			*	
STEELT ALORESS			63 STREET A	ODRESS			
City-St-ZiP			64 CHY-SI-	ZIP			
14. I do here	by certify that the information suppl	ed with this filing does not qua	lify for the exem	ption stated	d in Section 119.07(3)(i), Florida Statute my signature shall have the same leg	s. I further certify that	the
l abt an c	in indicated on this antiqui report of ifficer or director of the corporation in Block 12 or Block 13 if changed	or the receive for trustee emilio	owe#ed to execu	te this repor	rt as required by Chapter 607, Florida	Statutes; and that my i	name