

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

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May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P35857** (2)

1. Corporation Name
CONROC, INC.

Principal Place of Business

**2655 LE JEUNE RD.
STE 908
CORAL GABLES FL 33134
US**

Mailing Address

**2655 LE JEUNE RD.
STE 908
CORAL GABLES FL 33134-5813
US**

3. Date Incorporated or Qualified
10/09/1991

3a. Date of Last Report
05/28/1996

2. Principal Place of Business

21. **2655 LeJeune Rd.,**

Suite, Apt. #, etc.
22. **Ste. 1000**

City & State
23. **Coral Gables, FL**

Zip

24. **33134**

Country

25. **US**

2a. Mailing Address

26. **2655 LeJeune Rd.,**

Suite, Apt. #, etc.
27. **Ste. 1000**

City & State
28. **Coral Gables, FL**

Zip

29. **33134**

Country

30. **US**

4. FEI Number
51-0302239

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

9. Name and Address of Current Registered Agent

**MALE, MICHAEL H.
3250 MARY ST., STE. 303
MIAMI FL 33133**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	V	☐ DELETE
NAME	GUERRERO, JOSE LUIS	
STREET ADDRESS	2655 LEJEUNE RD, STE 908	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	VSTD	☐ DELETE
NAME	GALAZ, JAVIER MORA	
STREET ADDRESS	2655 LEJEUNE RD., STE 908	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	VST	☐ DELETE
NAME	CAYEULA, MANUEL SALVOCH	
STREET ADDRESS	2655 LEJEUNE RD, STE 908	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	DP	☐ DELETE
NAME	ESPELETA, ALFONSO	
STREET ADDRESS	2655 LE JEUNE RD., STE 908	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	VAS	☐ DELETE
NAME	FLORES, PORFIRIO	
STREET ADDRESS	2655 LE JEUNE RD., STE 908	
CITY-ST-ZIP	CORAL GABLES FL	
TITLE	VST	☐ DELETE
NAME	INDERBITZIN, ERNESTO	
STREET ADDRESS	2655 LE JEUNE RD., STE 908	
CITY-ST-ZIP	CORAL GABLES FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	Suite 1000
1.4 CITY-ST-ZIP	
2.1 TITLE	☒ Change ☐ Addition
2.2 NAME	V,AS,AT,D
2.3 STREET ADDRESS	Suite 1000
2.4 CITY-ST-ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	Suite 1000
3.4 CITY-ST-ZIP	
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	Suite 1000
4.4 CITY-ST-ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	Suite 1000
5.4 CITY-ST-ZIP	
6.1 TITLE	☒ Change ☐ Addition
6.2 NAME	V,AS,AT
6.3 STREET ADDRESS	Suite 1000
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 607, 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

4/26/97

Date

(305) 442-0427

Daytime Phone #

0180629

CR2E034 (9/96)

CONROC, INC.
FED ID #: 51-0302239

Addition
Title: V,AS,AT
Valles, Rodolfo F.
2655 LeJeune Rd., Suite 1000
Coral Gables, FL 33134

Addition
Title: V,AS
Serifa, Quirico
2655 LeJeune Rd., Suite 1000
Coral Gables, FI 33134

Addition
Title: V, AS
Marin, Ernesto
2655 LeJeune Rd., Suite 1000
Coral Gables, FL 33134