

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Norstrom
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P92000002770 (5)**

To: Corporation Name

LPG-SUPPLIES, INC.

APPROVED
AND
FILED

95 MAY -1 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

4995 NORTHWEST 79TH AVENUE
SUITE 116
MIAMI FL 33166

Mailing Address

C/O MARTIN PONS
169 E FLAGLER ST #1517
MIAMI FL 33131
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 State Apt # etc

22 City & State

23 City & State

24 City & State

25 City & State

26 City & State

27 City & State

28 City & State

29 City & State

30 City & State

2a. Mailing Address

26 State Apt # etc

27 City & State

28 City & State

29 City & State

30 City & State

3. Date Incorporated or Qualified

11/03/1992

3a. Date of Last Report

05/27/1994

4. FEI Number

65-0387578

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. This corporation has liability for intangible tax under § 199.009

Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

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

PONS, MARTIN E
169 EAST FLAGLER STREET
SUITE 1517
MIAMI FL 33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purposes 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 607.0508, Florida Statutes.

SIGNATURE

(Signature of Registered Agent must be typed in Block 12)

(Signature of Registered Agent must be typed in Block 13)

(Signature)

12. OFFICERS AND DIRECTORS

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (1-12)

1. NAME
D
DE ROUX, ANTONIO
2. STREET ADDRESS
4995 NORTHWEST 79TH AVENUE S-116
3. CITY & STATE
MIAMI FL 33166

1. NAME
D
DE ROUX, GUILLERMO
2. STREET ADDRESS
4995 NORTHWEST 79TH AVENUE S-116
3. CITY & STATE
MIAMI FL 33166

1. NAME
2. STREET ADDRESS
3. CITY & STATE

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2. NAME

3. NAME

4. NAME

5. NAME

6. NAME

7. NAME

8. NAME

9. NAME

10. NAME

11. NAME

12. NAME

13. NAME

14. NAME

15. NAME

16. NAME

17. NAME

18. NAME

19. NAME

20. NAME

21. NAME

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23. NAME

24. NAME

25. NAME

26. NAME

27. NAME

28. NAME

29. NAME

30. NAME

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and true, and is not qualified for the exemption under Section 199.009, Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the registered agent or bonded employment licensee of the corporation, as required by Chapter 199, Florida Statutes, and that my name appears in Block 12 or Block 13 of changed or newly added names with an address.

SIGNATURE:

Martin E Pons

MARTIN E PONS

3/15/95

305-371-2723

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR