

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

**APPROVED  
AND  
FILED**

1995 MAY -1 AM 10:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995



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

DOCUMENT # P92000003726 (6)  
1. Corporation Name  
**ANACAR CORPORATION**

Principal Place of Business: 6426 SW 134TH PL, MIAMI FL 33183  
Mailing Address: 6426 SW 134TH PL, MIAMI FL 33183

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business (21-24) and Mailing Address (25-30) fields.

3. Date incorporated or Qualified: 11/10/1992  
3a. Date of Last Report: 12/06/1994  
4. FEI Number: 65-0370097  
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: MARINEZ, CARLOS, 6426 SW 134TH PL, MIAMI FL 33183  
10. Name and Address of New Registered Agent (81-85) fields.

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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS (1-6) and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (7-12) fields.

12.1 NAME: MARINEZ, CARLOS, ADDRESS: 6426 SW 134TH PL, MIAMI FL 33183

13.1 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.2 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.3 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.4 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.5 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.6 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.7 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.8 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.9 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.10 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.11 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

13.12 NAME: \_\_\_\_\_, ADDRESS: \_\_\_\_\_

Stamp: 500001478025, 05/08/95-01010--018, \*\*\*\*200.00 \*\*\*\*200.00

Handwritten: 5005-1-95

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:  DATE: 4/24/95