

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

**FILED**  
**Jan 24, 1996 08:00 AM**  
**Secretary of State**

DOCUMENT # **P92000014483 (1)**



1. Corporation Name

**GABLES BY THE SEA, INC.**

Principal Place of Business

**8711 SW 97TH AVE., #230  
MIAMI FL 33173**

Mailin Address

**8711 SW 97TH AVE., #230  
MIAMI FL 33173**

2. Principal Place of Business

2a. Mailing Address

21 State: **FL**

22 City & State

23 Zip

24 Country

26 State: **FL**

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

**ROBAINA, JULIO  
8711 SW 97TH AVE., #230  
MIAMI FL 33173**

3. Date incorporated or Organized  
**12/28/1992**

3a. Date of Last Report  
**06/19/1995**

4. FET Number  
**65-0380925**

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 inter-jurisdictional tax and n.s. 190.032, Florida Statutes.  Yes  No

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 607.011 and 607.012, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the above agent of fact 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 not a director or officer of the corporation and I am not a shareholder.

SIGNATURE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**D** ROBAINA, JULIO  
**16221 ABERDEEN WAY.**  
**MIAMI LAKES FL**

**D** FERNANDO, RIVERO L.  
**8711 SW 97TH AVE #230**  
**MIAMI FL**

14. I hereby certify that the information reported herein is true, voluntarily furnished and does not qualify for the exemption set forth in Section 119.07(2)(b), Florida Statutes. I further certify that the information is true, correct and complete and that my signature shall have the same legal effect as if made under oath. I am an officer, director or bona fide agent of the registrant 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 of this report. Date of signature: **1-16-96**

SIGNATURE:

*J.P. Julio Robaina*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-16-96 305-279-3154**

CR2E034 (12/95)