

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 12:14

DOCUMENT # P93000000780 (5)

1. Corporation Name

COVEST HOLDINGS, INC.

Principal Place of Business

C/O PENNSULA REGISTERED AGENTS INC
600 SE FIRST STREET PM
MIAMI FL 33131

Mailing Address

C/O PENNSULA REGISTERED AGENTS INC
600 SE FIRST STREET PM
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/05/1993

3a. Date of Last Report
03/16/1994

4. FEI Number
65-0383594

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 USC.
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. C/O Blumberg, Grayson & Singer
Suite, Apt. #, etc.

22. 25 SE Second Avenue #730

23. Miami Florida

24. 33131 USA

2a. Mailing Address

26. C/O Blumberg, Grayson & Singer, P.A.
Suite, Apt. #, etc.

27. 25 SE Second Avenue #730

28. Miami Florida

29. 33131 USA

9. Name and Address of Current Registered Agent

PENNSULA REGISTERED AGENTS INC
- 600 SE FIRST STREET
- PM
- MIAMI FL 33131

10. Name and Address of New Registered Agent

81. Name
Blumberg, Grayson & Singer, P.A.
82. Street Address (P.O. Box Number is Not Acceptable)
25 SE Second Avenue #730
83.
84. City
Miami FL 85. Zip Code
33131

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 By: Blumberg, Grayson & Singer, P.A.

(Signature typed or printed below registered agent and the corporation)

(Signature typed or printed below registered agent and the corporation)

4/12/95
DATE

12. OFFICERS AND DIRECTORS

TITLE DPT
NAME ESPINO, PABLO J
STREET ADDRESS 25 SE 2d Ave #730
CITY ST ZIP Miami FL 33131

TITLE DVS
NAME DE ESTRIBI, ADELINA M
STREET ADDRESS 25 SE 2d Ave #730
CITY ST ZIP MIAMI FL Miami FL 33131

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

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NAME
STREET ADDRESS
CITY ST ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE ☐ Change ☐ Addition
12. NAME
13. STREET ADDRESS
14. CITY ST ZIP

21. TITLE ☐ Change ☐ Addition
22. NAME
23. STREET ADDRESS
24. CITY ST ZIP

31. TITLE ☐ Change ☐ Addition
32. NAME
33. STREET ADDRESS
34. CITY ST ZIP

41. TITLE ☐ Change ☐ Addition
42. NAME
43. STREET ADDRESS
44. CITY ST ZIP

51. TITLE ☐ Change ☐ Addition
52. NAME
53. STREET ADDRESS
54. CITY ST ZIP

61. TITLE ☐ Change ☐ Addition
62. NAME
63. STREET ADDRESS
64. CITY ST ZIP

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 119.07(2)(b), 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: Pablo J. Espino PABLO J. ESPINO

(Signature typed or printed below officer or director)

✓ April 25, 1995.