

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 21 AM 8:55

DOCUMENT # P93000005386 (6)

1. Corporation Name
MIKELA, INC.

Principal Place of Business
344 LYTLE ST
WEST PALM BEACH FL 33405

Mailing Address
344 LYTLE ST
WEST PALM BEACH FL 33405

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business:

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

23

27

Zip

Country

Zip

Country

24

25

29

30

3. Date Incorporated or Qualified

01/19/1993

3a. Date of Last Report

02/01/1994

4. FEI Number

65-0387973

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. 193.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LAMA, MIGUEL
344 LYTLE ST
WEST PALM BEACH FL 33405

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 of Agent or person authorized to register agent and file this report

(NOTE: Registered Agent signature required when submitting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11.1 TITLE

P

11.2 NAME

LAMA, MIGUEL

11.3 STREET ADDRESS

344 LYTLE ST
WEST PALM BCH FL

11.4 CITY - ST - ZIP

WEST PALM BCH FL

11.5 TITLE

V

11.6 NAME

LAMA, KELVIN E

11.7 STREET ADDRESS

344 LYTLE ST
W PALM BCH FL

11.8 CITY - ST - ZIP

W PALM BCH FL

11.9 TITLE

11.10 NAME

11.11 STREET ADDRESS

11.12 CITY - ST - ZIP

11.13 TITLE

11.14 NAME

11.15 STREET ADDRESS

11.16 CITY - ST - ZIP

11.17 TITLE

11.18 NAME

11.19 STREET ADDRESS

11.20 CITY - ST - ZIP

12.1 TITLE

12.2 NAME

12.3 STREET ADDRESS

12.4 CITY - ST - ZIP

12.5 TITLE

12.6 NAME

12.7 STREET ADDRESS

12.8 CITY - ST - ZIP

12.9 TITLE

12.10 NAME

12.11 STREET ADDRESS

12.12 CITY - ST - ZIP

12.13 TITLE

12.14 NAME

12.15 STREET ADDRESS

12.16 CITY - ST - ZIP

12.17 TITLE

12.18 NAME

12.19 STREET ADDRESS

12.20 CITY - ST - ZIP

P

Lama, Miguel
344 Lytle Street
West Palm Beach, FL

☒ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 on Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Miguel Lama
Miguel Lama

SIGNATURE AND TYPE IN PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Feb-16-95 (407) 5824066