

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

CORPORATION ANNUAL REPORT 1995

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



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 JAN 31 AM 8:35

DOCUMENT # P93000017374 (8)

1. Corporation Name

EUGENIO MARTINEZ-HUET, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address

4940 S.W. 82ND AVE. MIAMI FL 33155  
9572 SW 57 ST  
Miami, FL 33173

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9572 SW 57 ST.  
Miami, FL 33173

3. Date Incorporated or Qualified 03/08/1993  
3a. Date of Last Report 02/23/1994

2. Principal Place of Business 21 9572 SW 57 ST  
2a. Mailing Address 26 9572 SW 57 ST

4. FEI Number 65-0397681  
Applied For Not Applicable

Suite, Apt. #, etc. 22  
City & State 23 MIAMI, FL

5. Certificate of Status Desired  \$8.75 Additional Fee Required

City & State 27 MIAMI, FL

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

Zip 24 33173 Country 25 USA

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

Zip 29 33173 Country 30 USA

9. Name and Address of Current Registered Agent  
MARTINEZ-HUET, EUGENIO  
4940 S.W., 82ND AVE.  
MIAMI FL 33155

10. Name and Address of New Registered Agent  
81 Name MARTINEZ-HUET EUGENIO  
82 Street Address (P.O. Box Number is Not Acceptable) 9572 SW 57 ST  
83  
84 City MIAMI FL 85 Zip Code 33173

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 consequences of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE 1.25.95  
Signature typed or printed name of registered agent (if title 4 applicable) (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	MARTINEZ-HUET, EUGENIO
STREET ADDRESS	4940 S.W. 82ND AVE
CITY- ST- ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY- ST- ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY- ST- ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY- ST- ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY- ST- ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY- ST- ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 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 applicable, as an officer or director with an address.

SIGNATURE: *[Signature]* DATE 1.26.95 (305) 274-5889  
Signature typed or printed name of signing officer or director