

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000022517 (5)

1. Corporation Name
HERNAN VASQUEZ CORPORATION



Principal Place of Business
**17930 NW 2ND AVE.
MIAMI FL 33169**

Mailing Address
**17930 NW 2ND AVE.
MIAMI FL 33169**

3. Date Incorporated or Qualified 03/22/1993	3a. Date of Last Report 03/14/1995
4. FEI Number 65-0421377	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. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
VASQUEZ, HERNAN 17930 NW 2ND AVE. MIAMI FL 33169		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. State	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 607.0503, Florida Statutes.

SIGNATURE		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.1 NAME	D VASQUEZ, HERNAN	13.1 NAME	
12.2 STREET ADDRESS	17930 NW 2ND AVE.	13.2 STREET ADDRESS	
12.3 CITY-STATE-ZIP	MIAMI FL 33169	13.3 CITY-STATE-ZIP	
12.4 TITLE		13.4 TITLE	
12.5 NAME		13.5 NAME	
12.6 STREET ADDRESS		13.6 STREET ADDRESS	
12.7 CITY-STATE-ZIP		13.7 CITY-STATE-ZIP	
12.8 TITLE		13.8 TITLE	
12.9 NAME		13.9 NAME	
12.10 STREET ADDRESS		13.10 STREET ADDRESS	
12.11 CITY-STATE-ZIP		13.11 CITY-STATE-ZIP	
12.12 TITLE		13.12 TITLE	
12.13 NAME		13.13 NAME	
12.14 STREET ADDRESS		13.14 STREET ADDRESS	
12.15 CITY-STATE-ZIP		13.15 CITY-STATE-ZIP	
12.16 TITLE		13.16 TITLE	
12.17 NAME		13.17 NAME	
12.18 STREET ADDRESS		13.18 STREET ADDRESS	
12.19 CITY-STATE-ZIP		13.19 CITY-STATE-ZIP	
12.20 TITLE		13.20 TITLE	
12.21 NAME		13.21 NAME	
12.22 STREET ADDRESS		13.22 STREET ADDRESS	
12.23 CITY-STATE-ZIP		13.23 CITY-STATE-ZIP	
12.24 TITLE		13.24 TITLE	
12.25 NAME		13.25 NAME	
12.26 STREET ADDRESS		13.26 STREET ADDRESS	
12.27 CITY-STATE-ZIP		13.27 CITY-STATE-ZIP	
12.28 TITLE		13.28 TITLE	
12.29 NAME		13.29 NAME	
12.30 STREET ADDRESS		13.30 STREET ADDRESS	
12.31 CITY-STATE-ZIP		13.31 CITY-STATE-ZIP	
12.32 TITLE		13.32 TITLE	
12.33 NAME		13.33 NAME	
12.34 STREET ADDRESS		13.34 STREET ADDRESS	
12.35 CITY-STATE-ZIP		13.35 CITY-STATE-ZIP	
12.36 TITLE		13.36 TITLE	
12.37 NAME		13.37 NAME	
12.38 STREET ADDRESS		13.38 STREET ADDRESS	
12.39 CITY-STATE-ZIP		13.39 CITY-STATE-ZIP	
12.40 TITLE		13.40 TITLE	
12.41 NAME		13.41 NAME	
12.42 STREET ADDRESS		13.42 STREET ADDRESS	
12.43 CITY-STATE-ZIP		13.43 CITY-STATE-ZIP	
12.44 TITLE		13.44 TITLE	
12.45 NAME		13.45 NAME	
12.46 STREET ADDRESS		13.46 STREET ADDRESS	
12.47 CITY-STATE-ZIP		13.47 CITY-STATE-ZIP	
12.48 TITLE		13.48 TITLE	
12.49 NAME		13.49 NAME	
12.50 STREET ADDRESS		13.50 STREET ADDRESS	
12.51 CITY-STATE-ZIP		13.51 CITY-STATE-ZIP	
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12.65 NAME		13.65 NAME	
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12.67 CITY-STATE-ZIP		13.67 CITY-STATE-ZIP	
12.68 TITLE		13.68 TITLE	
12.69 NAME		13.69 NAME	
12.70 STREET ADDRESS		13.70 STREET ADDRESS	
12.71 CITY-STATE-ZIP		13.71 CITY-STATE-ZIP	
12.72 TITLE		13.72 TITLE	
12.73 NAME		13.73 NAME	
12.74 STREET ADDRESS		13.74 STREET ADDRESS	
12.75 CITY-STATE-ZIP		13.75 CITY-STATE-ZIP	
12.76 TITLE		13.76 TITLE	
12.77 NAME		13.77 NAME	
12.78 STREET ADDRESS		13.78 STREET ADDRESS	
12.79 CITY-STATE-ZIP		13.79 CITY-STATE-ZIP	
12.80 TITLE		13.80 TITLE	
12.81 NAME		13.81 NAME	
12.82 STREET ADDRESS		13.82 STREET ADDRESS	
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12.85 NAME		13.85 NAME	
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12.87 CITY-STATE-ZIP		13.87 CITY-STATE-ZIP	
12.88 TITLE		13.88 TITLE	
12.89 NAME		13.89 NAME	
12.90 STREET ADDRESS		13.90 STREET ADDRESS	
12.91 CITY-STATE-ZIP		13.91 CITY-STATE-ZIP	
12.92 TITLE		13.92 TITLE	
12.93 NAME		13.93 NAME	
12.94 STREET ADDRESS		13.94 STREET ADDRESS	
12.95 CITY-STATE-ZIP		13.95 CITY-STATE-ZIP	
12.96 TITLE		13.96 TITLE	
12.97 NAME		13.97 NAME	
12.98 STREET ADDRESS		13.98 STREET ADDRESS	
12.99 CITY-STATE-ZIP		13.99 CITY-STATE-ZIP	
12.100 TITLE		13.100 TITLE	

14. I do hereby certify that the information supplied in this filing is correctly furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplement thereto 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: *Hernan Vasquez* **Y-10 -96(305) 8643767**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)