

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/2/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**APPROVED
AND
FILED**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

95 JUL -6 AM 8:31

DOCUMENT # P93000033683 (2)

1. Corporation Name

ERNESTO ZUAZO PRODUCTIONS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1413 SW 20TH ST
MIAMI FL 33145

Mailing Address

1413 SW 20TH ST
MIAMI FL 33145

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
05/10/1993

3a. Date of Last Report
04/05/1994

2. Principal Place of Business

21

2a. Mailing Address

26

State, Apt. #, etc.

State, Apt. #, etc.

City & State

22

City & State

27

ZIP

24

Country

25

City

29

Country

30

4. FEI Number
65-0408465

Approved For
Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional
Fee Required**

6. Fees to be paid by filer

**\$5.00 May Be
Added to Fees**

8. This corporation has a liability insurance policy in force as required by Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**ZUAZO, ERNESTO
1413 SW 20TH ST
MIAMI FL 33145**

10. Name and Address of New Registered Agent

01 Name

02 Street Address (P.O. Box Number is Not Accepted)

03

04 City

FL

05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 person named Registered Agent and the filer

Signature of Registered Agent (signature required when changing)

Date

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS	
12a. TITLE	DPT ZUAZO, ERNESTO	13a. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12b. NAME	ZUAZO, ERNESTO	13b. NAME	
12c. STREET ADDRESS	1413 SW 20TH ST	13c. STREET ADDRESS	
12d. CITY, ST, ZIP	MIAMI FL 33145	13d. CITY, ST, ZIP	
12e. TITLE	DVS	13e. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12f. NAME	ZUAZO, MLAGROS N	13f. NAME	
12g. STREET ADDRESS	1413 SW 20TH ST	13g. STREET ADDRESS	
12h. CITY, ST, ZIP	MIAMI FL 33145	13h. CITY, ST, ZIP	
12i. TITLE		13i. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12j. NAME		13j. NAME	
12k. STREET ADDRESS		13k. STREET ADDRESS	
12l. CITY, ST, ZIP		13l. CITY, ST, ZIP	
12m. TITLE		13m. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12n. NAME		13n. NAME	
12o. STREET ADDRESS		13o. STREET ADDRESS	
12p. CITY, ST, ZIP		13p. CITY, ST, ZIP	
12q. TITLE		13q. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12r. NAME		13r. NAME	
12s. STREET ADDRESS		13s. STREET ADDRESS	
12t. CITY, ST, ZIP		13t. CITY, ST, ZIP	

14. I, the filer, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 316.07(1)(b), Florida Statutes. I further certify that the information excluded by the provisions of § 316.07(1)(b) of the Florida Statutes is not required to be included in the report. I am authorized to execute this report on behalf of the corporation and I am duly authorized 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, in full agreement with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-28-95

CR2E034 (3/95)