

**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 17 PM 1:18

**DOCUMENT # P93000035158 (3)**

1. Corporation Name  
**MACORIX, INC.**

Principal Place of Business Mailing Address  
**5750 SW 132ND TER MIAMI FL 33156**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>05/13/1993</b>	3a. Date of Last Report <b>06/15/1994</b>
4. FEI Number <b>65-0410401</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21. State, Apt. #, etc. 22. City & State 23. Zip Country	2a. Mailing Address 26. State, Apt. #, etc. 27. City & State 28. Zip Country
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9. Name and Address of Current Registered Agent <b>RODRIGUEZ, JOSE M 5750 SW 132ND TER MIAMI FL 33156</b>	10. Name and Address of New Registered Agent B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) B3 B4 City FL B5 Zip Code
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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 Registered Agent or Director)

(Signature of Registered Agent or Director)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>P</b>	<b>RODRIGUEZ, MARGARITA CORD</b> <b>5750 SW 132ND TERR</b> <b>MIAMI FL</b>	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <b>T</b>	<b>RODRIGUEZ, JOSE</b> <b>5750 SW 132ND TERR.</b> <b>MIAMI FL</b>	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE		6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(3)(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 on Block 12 or Block 13 of this document or on an attachment with an address.

SIGNATURE: *Jose M. Rodriguez* **Jose M. RODRIGUEZ.** 1/10/95 305 6630304  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR