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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthaui

Secretary of State DIVISION OF CORPORATIONS

1996

P93000036203 (6)

**DOCUMENT #** 1. Corporation Name CIC CAPITAL, INC.

**FILED** May 01 1996 8:00 am Secretary of State

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Principal Place of Business Mailing Address							3 18811681 tt8 18188 littl Batin SA(t) Batin SA(t) and Artis tales artis and a see the case				
888 BRICKELL AVE. 5TH FLOOR MIAMI FL 33131			888 BRICKELL AVE. 5TH FLOOR								
			MIAMI FL 33131			3. Date Incorporated or Qualified 3a. Date of Last Report 05/17/1993 05/01/1995			1995		
. Principal Plac	e of Business	Mailing Address				4. FEI Number Applied For			Applied For Not Applicable		
			6				\$8.75 Additional				
Suite. Apt. #, etc			Suite, Apt. #, etc.			5. Certificate of Status Desired			e Required		
City & State		27	City & State	_,			6. Election Campaign Financing		-	.00 May Be	
]		28			<b>.</b>		Trust Fund Contribution			ded to Fees	
Zφ	Country	ļ.,	Zip 1	<b>├</b> ¬	intry		8. This corporation has liability for Florida Statutes	iin:angibie s ∐No	E LAIX CINCIE	5 (55.002.	
<u> </u>	9. Name and Address of Curre	29	stored Agent	30	Τ		10. Name and Address of New		d Agent		
	9. Name and Address of Curre	iii negi	Stered Agent		81	Name					
CIC ADA	MINISTRATIVE SERVICES INC.				82	Street Add	ress (P.O. Box Number is Not Accepta	ible)			
888 BRICKELL AVE.							illest Address (				
5TH FLO					63						
MIAMI F	L 33131				84	City	······	F	EL  85	Zip Code	
	Signature, typed superified name of requirems age OFFICERS AI		ECTORS	13		e t signature respon	ADDITIONS/CHANGES TO OF	CAT	AND DIREC	OTORS IN 12	
12. 11TLE	D OFFICERS AF	AD Cara	DELETE		TILLE				☐ Chan	ge 🔲 Addition	
NAME	ORTEGA, LUIS A			12	NAMÉ						
STREET ADDRESS	888 BRICKELL AVE. 5TH F	LOOR				LADDRESS					
CITY - ST - ZIP	MIAMI FL 33131		ST DOLLE		CHY-	ST-ZIP			Char	ige Addition	
TETLE	D		DELETE		NAME						
NAME	GONZALEZ, HUMBERTO 888 BRICKELL AVE., 5TH I	FLOOF	ı			: ACIORESS					
STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33131	1001	•	2.4	CHY-	-ST - ZIP				- Addition	
TITLE	D		DETEJE	3	TITLE	:			Chai	nge 🔲 Addition	
NAMÉ	HERRERA, WILLIAM A				NAME	i					
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CITY - S1 - ZIP	MIAMI FL 33131		DELETE		1 T.TLI				☐ Cha	nge 🔲 Additiod	
TITLE NAME	D SANCHEZ, MANUEL		<del>- 4</del> '	4:	E NAMI	E					
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CITY-ST-7.P	MIAMI FL 33131					-S1 ZIP			☐ Cha	nge 🔲 Addition	
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NAME					2 NAM 3 SIRE	ELI ADORESS					
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NAME			. <del>-</del>	6	2 NAN	ie					
STREET ADDRESS						EFT ADDRESS					
CITY ST-ZIP				6	4 CF 1	- S1 - ZIP	ty for the exemption stated in Section	110 02/3/1	à Florida S	Statutes Lighther	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption is active in section in cated in the same legal effect as if made under certify that the information indicated on this annual report or supplemental number is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated in this annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information is called in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certify that the information indicated in the same legal effect as if made under certificities in the certificities in the same legal effect as if made under certificities in the cert

SIGNATURE:

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