## **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

PROFIT. CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

FILED

Jun 18 1997 8:00am

Secretary of State

Sandra B. Morthgan

Secretary of State DIVISION OF CORPORATIONS

1997

CITY-ST-ZIP

DOCUMENT # P93000036428 (9)

DISENO INDUSTRIAL FORM, CORP.

Principal Place of Business Mailing Address 4815 NW 79TH AVE. 4815 NW 79TH AVE. MIAMI FL 33166 MIAMI FL 33166-5437 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996 05/19/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 3021SW 3021 SW 65-0410706 Not Applicable Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 COCONUT ORO VE GROVE COCONUT Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032, 33133 25 29 Florida Statutes Yes No 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LOZADA, LUIS 3150 SW 122ND AVE. Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33175** 83 84 City 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 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required whon reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/6)DITETE TITLE 1.1 TO LE Change Addition 102ADA, LUIS LOZADA, LUIS NAME 1.2 NAME 30215W 28th LANC 3150 SW 122ND AVE. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33175** 1.4 CHY-\$1-7/P CITY-ST-ZIP COCONUT GROVE, FL 33183 DELETE TITLE Change Addition 2.1 TITLE RODANOMEZ-HOUSE NAME 2.2 NAME SZEJIW #86THLN STREET ADDRESS 23 STREET ADDRESS **PEMBROKE PINES FL** CITY-ST-ZIP 2 4 City-ST-ZIP POLLETE TITLE Change Addition 31 THILE GONZALEZ, JEANNETTE C. NAME 3.2 NAME STED SW-122ND AVE STREET ADDRESS 3.3 STREET ADDRESS **MAMI FL 33175** CITY-ST-ZIP 34. C(TY-S1-Z)P DELETE TITLE Change Addition 4.1 TITLE LOSADA: BLEAZAR. NAME 4. 2 NAME 4815 NW 79TH AVE. #1 STREET ADDRESS 4.3 STREET ADDRESS MIAMI-RI-23186 CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C(TY - S1 - Z)P DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 C(11Y - ST - 7/P 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; 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.