

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Apr 30 1996 8:00 am
Secretary of State

DOCUMENT # P93000042063 (6)

1. Corporation Name

ALEXANDER H. FACTORS INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

9300 NORTHWEST 58TH STREET
SUITE 209
MIAMI FL 33178

9300 NORTHWEST 58TH STREET
SUITE 209
MIAMI FL 33178

3. Date Incorporated or Qualified

06/09/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0421881

Applied For

Not Applicable

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

QUANT, EDUARDO M
9300 N.W. 58 STREET
STE. 209
MIAMI FL 33178

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME GARCIA, AUGUSTO
STREET ADDRESS 9300 NORTHWEST 58TH STREET
CITY-ST-ZIP MIAMI FL 33178

TITLE D ☐ DELETE
NAME MASFERRER, EDUARDO A
STREET ADDRESS 6971 SOUTHWEST 79TH AVENUE
CITY-ST-ZIP MIAMI FL 33143

TITLE D ☐ DELETE
NAME MARINAKIS, JUAN
STREET ADDRESS 15 CALLE I-11 ZONA 10 UE
CITY-ST-ZIP GUATAMALA CITY GUATAMALA

TITLE D ☐ DELETE
NAME NITZBERG, MAX
STREET ADDRESS 39 NORTH WOODS LANE
CITY-ST-ZIP BOYNTON BEACH FL

TITLE D ☐ DELETE
NAME MARTINELLI, GUIDO
STREET ADDRESS V. ESPANA, EDIF BNP LOCAL 14
CITY-ST-ZIP PANAMA REP. OF PANAMA

TITLE MS ☐ DELETE
NAME QUANT, EDUARDO
STREET ADDRESS 9300 N.W. 58 STREET, STE. 209
CITY-ST-ZIP MIAMI FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)