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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000058597 (4)

| CYMA HOLDINGS, INC. Principal Place of Business Mailing Address 2600 DOUGLAS RD 2600 DOUGLAS RD SUITE 406 CORAL GABLES FL 33134 CORAL GABLES FL 33134 | | | 34-6125 | | | | |
|---|---|---|--|--|--|--|--|
| : | | | | | 3. Date Iricorporated or Qualified 08/20/1993 | 3a. Date of Last Rt 04/22/1996 | eporl |
| 2. Principal Place of Business 21 | | 26. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 | | 4, FEI Number 65-0430973 | | plied For t Applicable | |
| Suite, Apt. #, etc. 22 City & State 23 | | | | | 5. Certificate of Status Desired | \$8.75 A | |
| | | | | | Election Campaign Financing Trust Fund Contribution | \$5.00 Added t | |
| Zip 24 | Country 25 | 7ip | Country 30 | у | 8. This corporation has liability for i | ntangible tax under s.] Yes 🌅 No | 199.032, |
| | g, Name and Address of Curre | | | | 10. Name and Address of New Re- | gistered Agent | |
| GOI | NZALEZ, CARLOS E | | 81 | Name | | | |
| 2600 DOUGLAS RD SUITE 406 | | | 82 | Street Add | t Address (P.O. Box Number is Not Acceptable) | | |
| | PAL GABLES FL 33134 | | 83 | | | | |
| | | | 84 | 84 City | | FL 85 Zip Code | |
| 11. Pursuant office or r agent. I a SIGNATURE | to the provisions of Sections 607.05f egistered agent, or both, in the State im familiar with, and accept the oblig | | tutes, the aboves authorized beforida Statute | | rporation submits this statement for the p ation's board of directors. I hereby accep | ourpose of changing its of the appointment as | s registered registered |
| | 12. OFFICERS AND DIRECTORS | | | gorii organololo requ | ureo when reinstaning) | DATE | |
| 12. | | | 13. | your organizate requ | ADDITIONS/CHANGES TO OFFIC | | S IN 12 |
| 12. 107LE | I DP | | | yanı ağı idini e taqı | | | |
| | OP Gonzalez, Carlos e | ND DIRECTORS | 13. | | | ERS AND DIRECTOR | |
| TITLE NAME STREET ADDRESS | I DP | ND DIRECTORS | 13. 1.1 TILLE 1.2 NAME 1.3 STREE | 1 ADDRESS | | ERS AND DIRECTOR | |
| TITLE NAME | DP GONZALEZ, CARLOS E 2600 DOUGLAS RD SUITE 4 CORAL GABLES FL | ND DIRECTORS | 13. 1.1 TITLE 1.2 NAME | 1 ADDRESS | | ERS AND DIRECTOR | Addition |
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