

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

DOCUMENT # P93000067437 (2)

1. Corporation Name

AURON 2000 INC.



Principal Place of Business

Mailing Address

800 BRICKELL AVENUE
STE 600
MIAMI FL 33131
US

800 BRICKELL AVENUE
STE 600
MIAMI FL 33131
US

3. Date Incorporated or Qualified
09/23/1993

3a. Date of Last Report
06/16/1995

2. Principal Place of Business

2a. Mailing Address

21 255 ALHAMBRA CIRCLE

26 255 ALHAMBRA CIRCLE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 1140

27 1140

City & State

City & State

23 CORAL GABLES FLORIDA

28 CORAL GABLES FLORIDA

24 33134

Country

29 33134

Country

25 USA

30 USA

4. FEI Number
65-0439971

Applied For
Not Applicable

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

MCCLASKEY, ROBERT M JR.
1550 MADRUGA AVENUE
STE. 120
CORAL GABLES FL 33146

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 607.0552 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 Not Applicable

Not Applicable Registered Agent signature required when instituting

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MILLER, ROBERT
STREET ADDRESS 800 BRICKELL AVENUE STE. 700
CITY-STATE-ZIP MIAMI FL 33131

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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CITY-STATE-ZIP

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13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT MILLER

4/30/96

305-446-8151