

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000076619 (4)

1. Corporation Name

B.P. INTERNATIONAL HOLDINGS, INC.

Principal Place of Business
501 VILABELLA AVENUE
CORAL GABLES FL 33146

Mailing Address
501 VILABELLA AVENUE
CORAL GABLES FL 33146

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/30/1993
3a. Date of Last Report 05/01/1994

4. FEI Number 65-0452397
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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PENICHER, PAUL F
201 ALHAMBRA CIRCLE
SUITE 711
CORAL GABLES FL 33134

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 (Type or printed name of registered agent and his or her address)

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME PENICHER, JOSE F
STREET ADDRESS 501 VILABELLA AVE.
CITY ST ZIP CORAL GABLES FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY ST ZIP

TITLE T
NAME BRADAO, VICTOR
STREET ADDRESS 4409 MONSERATE S T.
CITY ST ZIP CORAL GABLES FL

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME BRANDAO VICTOR
2.3 STREET ADDRESS 4409 MONSERATE ST
2.4 CITY ST ZIP CORAL GABLES FL

TITLE S
NAME PENICHER, SILVIA F
STREET ADDRESS 501 VILABELLA AVE.
CITY ST ZIP CORAL GABLES FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY ST ZIP

TITLE VP
NAME BRANDAO, MARIA E
STREET ADDRESS 4409 MONSERATE ST.
CITY ST ZIP CORAL GABLES FL

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME VP
4.3 STREET ADDRESS BRANDAO, MARIA E.
4.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY ST ZIP

TITLE
NAME
STREET ADDRESS
CITY ST ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY ST ZIP

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

Jose F. Penicher PRESIDENT

4/25/94 (300)887-2170

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number