

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000001388 (5)**

1. Corporation Name

A M C MARKETING CORP.



Principal Place of Business

**11555 SW 128 CT
MIAMI FL 33186-4744**

Mailing Address

**11555 SW 128 CT
MIAMI FL 33186-4744**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 **25**

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 **30**

9. Name and Address of Current Registered Agent

**ALVAREZ-REYES, ALFONSO
11555 SW 128 CT
MIAMI FL 33186-4744**

3. Date Incorporated or Qualified

01/06/1994

3a. Date of Last Report

07/24/1995

4. FEI Number

65-0460965

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

10. Name and Address of New Registered Agent

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 607.1505, 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 name) of the registered agent or the corporation

Typed Name of Agent (Typed Name of Corporation)

(SEE)

12. OFFICERS AND DIRECTORS

12.1 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
ALVAREZ-REYES, ALFONSO
11555 SW 128 CT
MIAMI FL 33186-4744

☐ DELETE

12.2 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

12.3 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

12.4 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

12.5 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

12.6 TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13.

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY - ST - ZIP

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY - ST - ZIP

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY - ST - ZIP

13.13 TITLE

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY - ST - ZIP

13.17 TITLE

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY - ST - ZIP

13.21 TITLE

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY - ST - ZIP

13.25 TITLE

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY - ST - ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ 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: **Alfonso Alvarez-Reyes**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALFONSO ALVAREZ REYES 3-14-96

Date

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