

**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 # P94000001445 (3)**

1. Corporation Name  
**LEXRO INC.**



Principal Place of Business Mailing Address  
**11382 SW 7 ST SWEETWATER FL 33174 US**

3. Date Incorporated or Qualified **12/28/1993** 3a. Date of Last Report **01/25/1995**  
4. FEI Number **65-0461185** 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 26  
22 Suite, Apt. #, etc. 27 Suite, Apt. #, etc.  
23 City & State 28 City & State  
24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent  
**ALVAREZ, ALEXANDER  
11382 SW 7 ST  
SWEETWATER FL 33174**

10. Name and Address of New Registered Agent  
81 Name **RODOLFO GONZALEZ**  
82 Street Address (P.O. Box Number is Not Acceptable) **11382 S.W. 7th STREET**  
83  
84 City **SWEETWATER** FL 85 Zip Code **33174**

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: *Rodolfo Gonzalez* DATE: **5/6/96**

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>GONZALEZ, RODOLFO H</b>	
STREET ADDRESS	<b>11382 SW 7 ST</b>	
CITY - ST - ZIP	<b>SWEETWATER FL</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>ALVAREZ, ALEXANDER</b>	
STREET ADDRESS	<b>11382 SW 7 ST</b>	
CITY - ST - ZIP	<b>SWEETWATER FL</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> DELETE
NAME	<b>AGULAR, MANUEL A</b>	
STREET ADDRESS	<b>9440 SW 17 TERR</b>	
CITY - ST - ZIP	<b>MIAMI FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>P, S, T, D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>RODOLFO H. GONZALEZ</b>	
1.3 STREET ADDRESS	<b>11382 S.W. 7th STREET, MIAMI, FL 33174</b>	
1.4 CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>D</b>	
2.3 STREET ADDRESS	<b>MANUEL A. AGUILAR</b>	
2.4 CITY - ST - ZIP	<b>9440 S.W. 17 TERR</b>	
3.1 TITLE	<b>MIAMI FL 33165</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	<b>100001833681</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	<b>-05/22/96--01014--082</b>	
5.3 STREET ADDRESS	<b>***208.75</b>	
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 in 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, on an attachment with an address.

SIGNATURE: *Rodolfo Gonzalez* DATE: **4/15/96** 305-553-4333

CR2E034 (12/95)