

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Apr 07 1997 8:00am
Secretary of State

DOCUMENT # P94000002803 (2)

1. Corporation Name

PRODUCCIONES DESTINO SIETE, INC.



Principal Place of Business

9130 S. DADELAND BLVD.
SUITE 1704
MIAMI FL 33156

Mailing Address

9130 S. DADELAND BLVD.
SUITE 1704
MIAMI FL 33156-7858

3. Date Incorporated or Qualified
12/20/1993

3a. Date of Last Report
08/08/1996

4. FEI Number

65-0466200

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

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

BERCUSON, DAVID
9130 S. DADELAND BLVD.
2 DATRAN CENTER, SUITE 1704
MIAMI FL 33156

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 607.1508, 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 DAVID BERCUSON and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

4/2/97

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE
1.2 NAME SUAREZ, HECTOR
1.3 STREET ADDRESS 9130 S. DADELAND BLVD., 2 DATRAN CNTR, #1704
1.4 CITY-STATE-ZIP MIAMI FL 33156

2.1 TITLE ☐ DELETE
2.2 NAME VP
2.3 STREET ADDRESS DE SUAREZ, JOSEFINA GOMIS
2.4 CITY-STATE-ZIP 9130 S. DADELAND BLVD., 2 DATRAN CNTR
MIAMI FL

3.1 TITLE ☐ DELETE
3.2 NAME SUAREZ, JULIETA
3.3 STREET ADDRESS 9130 S. DADELAND BLVD., 2 DATRAN, #1704
3.4 CITY-STATE-ZIP MIAMI FL

4.1 TITLE ☐ DELETE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ DELETE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ DELETE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SR. HECTOR SUAREZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/97

Date Daytime Phone #

CR2E034 (9/96)