

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

Feb 07 1996 8:00 am
Secretary of State

DOCUMENT # P94000011151 (5)

1. Corporation Name

FLORIDA CLIFFHANGER SERVICES, INC.



Principal Place of Business

8163 N.W. 60TH ST.
MIAMI FL 33166

Mailing Address

8163 N.W. 60TH ST.
MIAMI FL 33166

2. Principal Place of Business

21 5561 NW 74 Ave
Sub: Apt. #, etc.

22 City & State
23 MIAMI FL

24 Zip 33166 25 Country

2a. Mailing Address

26 5561 NW 74 Ave
Sub: Apt. #, etc.

27 City & State
28 MIAMI FL

29 Zip 33166 30 Country

3. Date of Incorporation or Qualification

02/10/1994

3a. Date of Last Report

05/01/1995

4. FET Number

65-0462673

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

CALDERIN, ROBERTO
8163 N.W. 60TH ST.
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

5561 NW 74 Ave

83

84 City

MIAMI

FL

85 Zip Code

33166

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 607.0508, Florida Statutes.

SIGNATURE

(Signature of person authorized to change registered office or agent)

(Signature of Registered Agent and new registered office)

(Date)

12. OFFICERS AND DIRECTORS

12.1 TITLE DO
12.2 NAME CALDERIN, MIRIAM
12.3 STREET ADDRESS 8163 N.W. 60TH ST
12.4 CITY, ST, ZIP MIAMI FL
12.5 TITLE P
12.6 NAME CALDERIN, ROBERTO
12.7 STREET ADDRESS 8163 N.W. 60TH ST
12.8 CITY, ST, ZIP MIAMI FL

12.9 TITLE
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE
13.2 NAME CALDERIN, MIRIAM
13.3 STREET ADDRESS 5561 NW 74 Ave
13.4 CITY, ST, ZIP MIAMI FL 33166
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13.99 STREET ADDRESS
14.00 CITY, ST, ZIP

14. I hereby certify that the information supplied on this form was 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 document 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, and that I am duly authorized and empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if I am not a director or officer of the corporation.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature of Secretary of State

CR2E034 (12/95)