FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000020359 (3)**

1. Corporation Name

LIEN LETTERS, INC.

Principal Place of Business	Mailing Address
15271 N.W. 60TH AVE. SUITE 203 MIAMI LAKES FK 33014	15271 N.W. 60TH AVE. SUITE 203 MIAMI LAKES FK 33014

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/16/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 15271 N.W. 60th Ave.	26 15271 N.W. 60th AVE
Suite, Apt. #, etc. 22 SUITE 201	Suite, Apt. #, etc. 27 SUITE 201
City & State 23 Miami Lakes, FL	City & State 28 Miami Lakes, FL
Zip / Country 24 33014 / 25 U.S.	Zip / Country 29 33014 / 30 U.S.

4. FEI Number: 65-0481840 ☐ 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	10. Name and Address of New Registered Agent
RODRIGUEZ, DANIEL 6492 CORAL WAY MIAMI FL 33155	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, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		11 TITLE	PRESIDENT	☐ Change ☑ Addition
NAME		12 NAME	DANIEL RODRIGUEZ	
STREET ADDRESS		13 STREET ADDRESS	6492 CORAL WAY	
CITY-ST-ZIP		14 CITY-ST-ZIP	MIAMI, FL 33155	
TITLE		21 TITLE	VICE-PRESIDENT	☐ Change ☑ Addition
NAME		22 NAME	GARY J. BALDACCINI	
STREET ADDRESS		23 STREET ADDRESS	14600 BALGOWAN AVE.	
CITY-ST-ZIP		24 CITY-ST-ZIP	MIAMI LAKES, FL 33016	
TITLE		31 TITLE	SECRETARY/TREASURER	☐ Change ☑ Addition
NAME		32 NAME	NATALIO EPPEL	
STREET ADDRESS		33 STREET ADDRESS	200 LESLIE DR. APT 515	
CITY-ST-ZIP		34 CITY-ST-ZIP	HALLENDALE, FL 33009	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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)(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: D. Rodriguez /DANIEL RODRIGUEZ 4-28-95 305/826-7116
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — (Daytime Phone #)

0094409 CP