

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 17 PM 3:30

DOCUMENT # P94000026142 (7)

1. Corporation Name:
EL EXITO INC.

Principal Place of Business:

**14719 S.W. 113TH ST.
MIAMI FL 33196**

Mailing Address:

**14719 S.W. 113TH ST.
MIAMI FL 33196**

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Transfer: **04/05/1994**

3a. Date of Last Report

4. FET Number: **CS-0479687**

Applied For
Not applicable

5. Certificate of Status Required ☐ **\$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. 193.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business:

2a. Mailing Address:

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RODRIGUEZ, JOSE
14719 S.W. 113TH ST.
MIAMI FL 33196**

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 must be printed name of registered agent and filed applicant)

(NAME, Registered Agent, Registered Agent and Registered Agent)

(FAX)

12. OFFICERS AND DIRECTORS

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**PSD
RODRIGUEZ, JOSE
14719 S.W. 113TH ST.
MIAMI FL 33196**

1. TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY, ST, ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY, ST, ZIP
☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not apply for the exemption statute in Section 193.032, Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that the corporation has filed this report in compliance with the provisions of the statute. I am an officer or director of the corporation or the receiver or trustee of the corporation or the person who has been designated by the corporation to file this report and that my name appears on Block 12 or Block 13 of this report or on an attachment with an address.

SIGNATURE:

Jose Rodriguez
NAME, TITLE, AND TYPE OR PRINT NAME OF SIGNING OFFICER OR DIRECTOR

2-2-95 222-4787