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

P94000026994 (1) **DOCUMENT #**

1. Corporation Name

COUNTRY WALK S	SERVICE	CORPO I	RATION
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Principal Place	of Business	Mailing Addres							
14600 SW 15 MIAMI FL 331			14800 SW 154 TERRACE Miami FL 33177						
						Date incorporated or Qualified 04/06/1994		e of Last Re 8/14/19 9	
2. Principal Pla	ace of Business	2a. Maling Ade	dress			4. FEI Number		├ ─- ├ -	Applied For
26		26			65-0482323			Not Applicable	
Suite, Apt	#, etc.	Suite Apt.	#, etc			5. Certificate of Status Desired			Additional Required
City & State)	City & Stat	é			6. Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	L c	ountry		8. This corporation has liability for		ax under s	199.032,
)	25	29	30			Florida Statutes			
<u> </u>	9. Name and Address of Cur	rrent Registered Ager	it .			10. Name and Address of New R	egistered	Agent	
				81	Name				
RODRIQ	IUEZ, MARCOS A			82	Street Addr	ess (P.O. Box Number is Not Acceptat	le)		
	SW 154 TERRACE			-					
MIAMI F	EL 33177			83	ļ				
				84	City		FI	85 Zı	p Code
					1	and an authorite true etatement for the pu			registered offi
or register	rod agent, or both, in the State of t	Banda, Such chande W	as admonzed by u	inave- ie corp	named corpo poration's boa	ration submits this statement for the purify of directors. I hereby accept the app	ointment a	is registered	l agent. I am
familiar wi	ith, and accept the obligations of, S	Section 607 0505, Étoric	in Statutes.						
SIGNATURE	Signal in Speed to pointed force of regularists	and the standards	National Revised	cost Aut	of some fate to be	es programment datrip	0A1:		
12.		AND DIRECTORS		3.		ADDITIONS/CHANGES TO OFF	ICERS AN	ID DIRECTO	DRS IN 12
DTLE	PTD		DELETE	1 TITLE				☐ Change	Additio
IAME	RODRUQUEZ, MARCOS A	Α	1	2 NAME					
TREET ADDRESS	14600 SW 154 TERRACE		1	3 STHEE	: ADDRESS				
	MIAMI FL 33177		1,	4 Cilir -	ST ZIP			_	
CITY-ST ZIP TITLE	, , , , , , , , , , , , , , , , , , ,			1 1111.6				Change	Addit o
				2 NAME]				
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STREET ADDRESS				4 CITY-					
CITY - ST - ZIP TITLE		··· ··· · · · · · · · · · · · · · · ·		1 1111				Change	Addition
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STREET ADDRESS CITY+ST-ZIP			li i						
				1 1 1 1 1	21.41				
TITLE		·		44 001Y 14 1060				Change	Additio

64 CITY - ST. ZIF 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 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 early, that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607. Forida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CPTY - \$1 - ZIP

5 1 TITLE

5.2 NAME

6 LTITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

NAME

THILE

NAME

TITLE

STREET ADDRESS CITY - ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

OFFICE OF ROOF 16412

DELETE

DELETE

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