

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
32399-0001
TELEPHONE 904-229-2000

APPROVED
AND
FILED

95 APR 23 PM 2:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000029181 (2)**

D'FINE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: 13325 S.W. 1ST TERRACE
MIAMI FL 33184

Mailing Address: 13325 S.W. 1ST TERRACE
MIAMI FL 33184

2. Principal Place of Business: 2a. Mailing Address:

21. State, Apt. #, etc. 26. State, Apt. #, etc.

22. City & State 27. City & State

23. City & State 28. City & State

24. City & State 25. City & State 29. City & State 30. City & State

3. Date for Preparation of Certificate: 04/15/1994
3a. Date of Last Report

4. FET Number: 65-0495347
5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing: ☐ \$5.00 May Be Added to Fees

7. This corporation has submitted for filing its annual report for the year ending 12/31/94, Florida Statutes: ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GONDAR, JULIO R
13325 S.W. 1ST TERRACE
MIAMI FL 33184

81. Name:
82. Street Address (P.O. Box Number is Not Acceptable):
83. City:
84. City: FL 85. Zip Code:

11. Pursuant to the provisions of Sections 607 and 607.108, 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, Sections 607.108, Florida Statutes.

SIGNATURE

Signature of Registered Agent (if changing agent, sign here)

Signature of Registered Agent (if changing agent, sign here)

(Date)

12. OFFICERS AND DIRECTORS

NAME	PD LOPEZ, FIDEL A
STREET ADDRESS	7795 W FLAGLER ST
CITY, ST, ZIP	MIAMI FL 33126
NAME	VD GONDAR, JULIO R
STREET ADDRESS	13325 S.W. 1ST TERR
CITY, ST, ZIP	MIAMI FL 33184
NAME	SD LOPEZ, ILEANA
STREET ADDRESS	7795 W FLAGLER ST
CITY, ST, ZIP	MIAMI FL 33126
NAME	TD GONDAR, CRISTINA M
STREET ADDRESS	13325 S.W. 1ST ST
CITY, ST, ZIP	MIAMI FL 33184
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	Change ☐ Addition ☐
STREET ADDRESS	
CITY, ST, ZIP	
NAME	Change ☐ Addition ☐
STREET ADDRESS	
CITY, ST, ZIP	
NAME	Change ☐ Addition ☐
STREET ADDRESS	
CITY, ST, ZIP	
NAME	Change ☐ Addition ☐
STREET ADDRESS	
CITY, ST, ZIP	
NAME	Change ☐ Addition ☐
STREET ADDRESS	
CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true, and is fully for the corporation stated in Section 607.108, Florida Statutes. I further certify that this information is filed in the annual report or quarterly financial report, and is accurate and that my signature shall have the same legal effect as if made in the State of Florida. I am an officer or director of the corporation or the registered agent of the corporation and I am familiar with, and accept the obligations of, Sections 607.108, Florida Statutes, and that my name appears in Block 12 of Block 13 of this report.

SIGNATURE:

Julio R Gondar
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 4-23-95