

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

DOCUMENT # P94000031726 (0)

1. Corporation Name

BRISTOL INVESTMENTS INTERNATIONAL, INC.



Principal Place of Business

8180 N.W. 36TH STREET
SUITE 100
MIAMI FL 33166

Mailing Address

8180 N.W. 36TH STREET
SUITE 100
MIAMI FL 33166

2. Principal Place of Business

21 1234 S. DIXIE HWY.

Suite, Apt. #, etc.

22 314

City & State

23 CORAL GABLES, FL

24 Zip 33146

Country

2a. Mailing Address

26 1234 S. DIXIE HWY

Suite, Apt. #, etc.

27 314

City & State

28 CORAL GABLES, FL

29 Zip 33146

Country

3. Date Incorporated or Qualified

04/26/1994

3a. Date of Last Report

05/01/1995

4. FET Number

65-0575237

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

ROBLEDO, ANTHONY
8180 N.W. 36TH STREET
SUITE 100
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

NEWTON MATTOS

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

1234 S. DIXIE HWY, A 314

83

84 City

CORAL GABLES

FL

85 Zip Code

33146

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 for 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 of the registered agent and title if applicable

(Print) Registered Agent Signature (Required when changing)

Date

3-11-96

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME FRANCO, ISABELLA G
STREET ADDRESS 8180 N.W. 36TH STREET, SUITE 100
CITY-ST-ZIP MIAMI FL 33166

TITLE D ☐ DELETE
NAME MATTOS, NEWTON
STREET ADDRESS 8180 N W 36TH STREET
CITY-ST-ZIP MIAMI FL 33166

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(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 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: X NEWTON MATTOS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 3-11-96 X (305) 668-0770

CR2E034 (12/95)