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

PROFIT CORPORATION ANNUAL REPORT



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

1996

P94000034126 (0) **DOCUMENT #**

CORAL GATE ENTERPRISES, INC.



Principa! Place of	of Business	Mailing Address	Mailing Address 150 W. Flagler Street Ste. 2101 MIAMI FL 33130				
150 W. FLA MIAMI FL 3	gler street ste. 2101 3130						
					3. Date Incorporated or Qualified 05/05/1994	3a. Date of Last 11/29/	
2. Principal Pla	ce of Business	2a. Maiing Andress			4. FEI Number		Applied For
1		26	26		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution □ \$5.00 May Be Added to Fees		
Zip Country 25		Ζ(p)	Zip Country 30		This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New F	legistered Agent	
			81	Name			
	iguez, jorge l Obert L. Roth,p.a.				Address (P.O. Box Number is Not Acceptable)		
150 W.	FLAGLER STREET STE. 2101		83	1			
MIAMI	FL 33130		84	City		FL 85	Zip Code
	1				ration submits this statement for the pu		
SIGNATURE	p=====================================	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	TIGERS AND DIRECT	
TITLE	D	☐ DELETE	1 1 T:TLF	•		∐ Chang	je 🔲 Addition
NAME	DOMINGUEZ, JORGE A		1.2 NAME				
STREET ADDRESS C/O 150 W. FLAGLER STRE		REET STE. 2101		T ADERESS			
CITY - ST - ZIP	MIAMI FL 33130	DELETE	14 CITY - 2 1 TIFLE			Chang	ge 🔲 Addition
TITLE NAME			2 2 NAME				, _
STREET ADDRESS				EL ADORESS			
CITY-ST-ZIF			2.4 CITY -	ST-ZIP			
TITLE		☐ DELE1E	3 1 7171.6			Chang	ge Addition
NAME			3.2 NAME	1			
STREET ADDRESS				E1 ADDRESS			
CITY-ST-ZIP		DELETE	3.4 CHV -			Chan	ge Addition
TITLE NAME			4 1 111; E				o- 🗀
NAME STREET ADDRESS				ET ADDRESS			
City-St-ZIP			4.4 CITY				
TITLE		[] DELETE	5 1 111(1	F		☐ Charr	ige 🔲 Addition
NAME			5.2 NAME	,			
STREET ADDRESS				ET ADDRESS			
CITY - ST - ZIP		F7 DE SES	5.4 CiTY -			☐ Chan	nge Addition
TITLE		☐ DEFELE	6 ' Tilt.6			[] Ghan	a. 🗀 waaman
NAME			6.2 NAME	ET ADDRESS			
STREET ADDRESS			6.4 CITY				
CITY-SI-ZIF		et with this films is reshart at 5 ft. for	maiched and de	nos not cualifi	for the execution stated in Section 119	07(3)(k) Florida St	atutes I further

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 this 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

4:15.96 358-1001