

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

*** CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAR 13 PM 2:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000040315 (1)

1. Corporation Name

NHS POWER CORP.

Principal Place of Business

316 ROYAL POINCIANA PLAZA
PALM BEACH FL 33480

Mailing Address

316 ROYAL POINCIANA PLAZA
PALM BEACH FL 33480

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/27/1994

3a. Date of Last Report

4. FEI Number

65-0498098

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fees 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

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**HARRY J. FRIEDMAN P.A.
200 SOUTH BISCAYNE BLVD.
SUITE 4000
MIAMI FL 33131-2398**

10. Name and Address of New Registered Agent

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, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

V/T

☐ Change ☒ Addition

1.2 NAME

Blomqvist, Erik J.

1.3 STREET ADDRESS

316 Royal Poinciana Plaza
Palm Beach, Florida 33480

1.4 CITY- ST- ZIP

2.1 TITLE

EV/AS/D

☐ Change ☒ Addition

2.2 NAME

Carson, Donald W.

2.3 STREET ADDRESS

316 Royal Poinciana Plaza
Palm Beach, Florida 33480

2.4 CITY- ST- ZIP

3.1 TITLE

V

☐ Change ☒ Addition

3.2 NAME

Copero, Gustavo R.

3.3 STREET ADDRESS

316 Royal Poinciana Plaza
Palm Beach, Florida 33480

3.4 CITY- ST- ZIP

4.1 TITLE

A/T

☐ Change ☒ Addition

4.2 NAME

De la O, Arturo

4.3 STREET ADDRESS

316 Royal Poinciana Plaza
Palm Beach, Florida 33480

4.4 CITY- ST- ZIP

5.1 TITLE

V

☐ Change ☒ Addition

5.2 NAME

Dominicis, Jorge A.

5.3 STREET ADDRESS

316 Royal Poinciana Plaza
Palm Beach, Florida 33480

5.4 CITY- ST- ZIP

6.1 TITLE

☐ Change ☒ Addition

6.2 NAME

(See Attachment For Continuation)

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)(b), Florida Statutes. I further certify that the information indicated in 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 in change, or on an attachment with an address. **José P. Valdivia, Jr., Esq.**

Vice President/Secretary

3-8-95

407-655-6303

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**ATTACHMENT
TO
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1. Corporation Name

NHS POWER CORP.

13. - CONTINUED ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV Fanjul, Alexander L. 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/CEO/D Fanjul, Alfonso 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV/D Fanjul, Andrés B. 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC/P/COO/D Fanjul, José F. 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Fernández, Luis J. 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Hernández, Oscar R. 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS/GC/CLO Klock, Joseph P., Jr., Esq. 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV Recio, Alberto S. 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV/AS Ross, Daniel D., Esq. 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Ryan, Allan, IV 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/LC/AS Tarr, William F., Esq. 316 Royal Poinciana Plaza Palm Beach, Florida 33480	☐ Change ☒ Addition

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1. Corporation Name

NHS POWER CORP.

13. - CONTINUED ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

**V/S/D
Valdivia, José F., Jr., Esq.
316 Royal Poinciana Plaza
Palm Beach, Florida 33480**

[] Change [X] Addition