

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra H. Norstrom
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000045037 (6)

1. Corporation Name

ATS OF MIAMI, CORP.

**APPROVED
AND
FILED**

06/13/94 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**16001 NE 18TH PLACE
STE. 2
NO. MIAMI BEACH FL 33162**

Mailing Address

**16001 NE 18TH PLACE
STE. 2
NO. MIAMI BEACH FL 33162**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

06/13/1994

3a. Date of Last Report

2. Principal Place of Business

21 1379 NE 182 St.

2a. Mailing Address

26 1379 NE 182 St.

Suite, Apt. # etc.

Suite, Apt. # etc.

City & State

23 N.N.B. FL.

City & State

28 N.N.B. FL.

24 33/62

Zip

29 33/62

Zip

4. FEI Number

65-0496637

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 § 190.002
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**TUESTA, RAFAEL A
16001 NE 18TH PLACE
STE. 2
NO. MIAMI BEACH FL 33162**

10. Name and Address of New Registered Agent

81 Name

RAFAEL A. TUESTA

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

1379 NE 182 St.

83

84 City

NORTH MIAMI BEACH

FL

85 Zip Code

33162

11. Pursuant to the provisions of Sections 607.0605 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 607.1508, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Required for Change of Registered Agent)

Signature of New Registered Agent (Required for Change of Registered Agent)

(67)

12. OFFICERS AND DIRECTORS

12.1

NAME

**D
TUESTA, RAFAEL A
16001 NE 18TH PLACE
NO. MIAMI BEACH FL 33162**

12.2

NAME

**D
MERINO, RYDER
16001 NE 18TH PLACE
NO. MIAMI BEACH FL 33162**

12.3

NAME

**D
PEREZ, JUAN A
16001 NE 18TH PLACE
NO. MIAMI BEACH FL 33162**

12.4

NAME

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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NAME

14. I, the undersigned, certify that the information supplied with this filing is true, correct, and complete, and that the undersigned is duly qualified to be the registered agent of the corporation. I further certify that the information submitted as the annual report or supplemental annual report is true and correct, and that the undersigned shall cause the corporation to file a supplemental report if it is required to do so. I am familiar with and accept the obligations of Section 607.1508, Florida Statutes, and that my signature appears in Block 12 or Block 13 of this filing or on any other report with an addendum.

SIGNATURE:

RAFAEL A. TUESTA
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/94