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

P94000046156 (3)

MAYAN INDUSTRIES, INC.

Principal Place of Business

DOCUMENT #
1. Corporation Name

Mailing Address



3325 HOLLYWOOD BLVD. SUITE 500 HOLLYWOOD FL 33021		3325 HOLLYWOOD SUITE 500 HOLLYWOOD FL 33		3. Date incorporated or Qualified 06/20/1994	3a. Date of Last Report 03/01/1995
h		2a. Mailing Address	2 (210)	4. FEI Number	Applied For
was also and a substantial control of the substa		26 P.O. 130	X 220423	NOT APPLICABLE	Not Applicable
Suite, Apt. #, etc. 27 27		Stille, Apt. #, etc.	x 350453 derdale, F	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State 28		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	30016	Country	8. This corporation has liability for	,
24	25] 9. Name and Address of Cu	29 33315	30 V3A	Florida Statutes Yes 10. Name and Address of New F	No
3325 H SUITE (HOLLY) 11. Pursuant to or registere familiar with GIGNATURE	wood FL 33021 the provisions of Sections 607.0 d agent, or both, in the State of Fin, and accept the obligation of Sections, specially register.	forida, Such change was authoric socia 607.0505, Florida Statute	83 84 City tes, the above named or corporation's s.		FL 85 Zip Code prose of changing its registered office ointment as registered agent. I am
12.	ÖFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TLE	P	DELETE	1 1 TITLE	P .	Change 🔲 Addition
NAME Street Address City-St-Zip	TIREET ADDRESS 3325 HOLLYWOOD BLVD. SUITE 500			Lopez, Andres 115 N.E. 202 Terr No. Miani Boach.	ACL , Apt M30
TITLE		DELETE	1.4 CITY - ST - ZIP 2 1 TITLE	100-11116mi-1945m11	Change Addition
NAME			2.2 NAME	5	
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2.4 CITY - ST - ZIP		
1(TLE		DELETE	3 1 1111 8	The second secon	Change Addition
NAME			3.2 NAME		
STREET ADDRESS	RESS		33 STREET ADDRESS	300001839883 -05/25/9601003007	
CITY-ST-7IP			3.4 CITY - ST - 2IP	00.400 400 = 01	nn 2nn 7
TIFLE		DELETE	4. 1 TITLE	***200.00	Change Addition
NAME			4.2 NAME	*******	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-SI-ZIP			4.4 City - St - ZIP		
TITLE		DELETE	5. 1 TILE		Change Addition
NAME					
STREET ADDRESS			5.2 NAME 5.3 S1RSE LADDRESS		
CITY-ST-ZIP TITLE			6 1 TITLE		Charles Addition
		[] billie	6.2 NAME	CI Make CI MODITION	
	NAME			113	
STREET ADDRESS			6 3 STREET ADDRESS		22
CITY-ST-ZIP 6.4 CITY-S 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and doe				life for the exempting stated in Costing 110	07/2VIA Florida Stat dos 1 further

certify that the information indicated on this armual report or supplements' 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 resover 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 in an attact and address.

SIGNATURE:

MING OFFICER OR DIRECTOR

May 1, 1996 B51-1067