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

DOCUMENT #

P94000048934 (1)

TORO INVESTIGATION AGENCY, INC. Principal Place of Business Mailing Address 18980 N.E. 4TH CT. MIAMI FL 33179 MIAMI FL 33179					
				 Date Incorporated or Qualified 06/27/1994 	3a. Date of Last Report 09/28/1995
2. Principal Plac	o of Purinose	2a. Mailing Address		4. FEI Number	Applied For
	e di busiless	26		65-0504742	Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
2		27		5. Continuate of States Doubles	ree nequired
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
3		28	·	Trust Fund Contribution	Auden to Fees
Zip	Country	Zip	Country	This corporation has liability for in Florida Statutes Yes	itangible tax under s. 199.032,
4	[25]	29	30	10. Name and Address of New Re	
	9. Name and Address of Cu	irrent Registereo Agent	81 Name	(U) Hame the Address of New Tre	
	O, GUY R		82 Street Add	ress (P.O. Box Number is Not Acceptable	э)
	.E. 4TH CT.		83		
MIAMI FI	_ 33179				7-6-2-
			84 Gity		FL 85 Zip Code
12.		Lagerial and title 4 application (NO SI AND DIRECTORS ☐ DELETE	TE: Registered Agent signature require 13. 1 1 TIFLE	ec when reinstaling! ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	P	DER IE	1.2 NAME		_ stange _ name
NAME	ROBLEJO, GUY		1.3 STREET ADDRESS		
STREET ADDRESS	2165 N.E. 187 ST.	•	1.4 CITY - ST - ZIP		
CITY - ST - ZIP TITLE	N. MIAMI BCH. FL 3317	[] DELETE	2 1 TiTLE		Change Addition
NAME		<u>.</u> .	2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELF1E	3 17171€		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		Change Addition
TITLE		DELETE	4. 1 TITLE		□ cuange □ Mudition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		m nei Esc	4.4 CITY - ST - ZiP		Charige Addition
TITLE		DELETE	5.1 TITLE 5.2 NAME		Special Company
NAME			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY - ST- ZIP		
CITY-ST-ZIP		DELETE	6 1 TITLE		☐ Charige ☐ Addition
TITLE			62 NAME		
NAME CTREET ADDRESS			6.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			64 CHY-ST-7IP		
GHT-SI-ZIF	and that the information curs	volled with this films is voluntarily fur	nished and does not qualify	for the exemption stated in Section 119	.07(3)(k), Florida Statutes. I further

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 119.0/(3)(i), Florida Statutes. Fluring certify that the information indicated on this annual report or supplier 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 comparison or the receipt or trustee impowed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SUPPLING OFFICER OR DIRECTOR

5-8-6

Daytine Priore #