

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **P94000050259 (8)**

1. Corporation Name

**M & H INVESTMENTS OF MIAMI, INC.**



Principal Place of Business

**10410 S.W. 56TH TERRACE  
MIAMI FL 33173**

Mailing Address

**10410 S.W. 56TH TERRACE  
MIAMI FL 33173**

2. Principal Place of Business

21 Subj. Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Subj. Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

**DIAZ, MARIA E  
10410 S.W. 56TH TERRACE  
MIAMI FL 33173**

3. Date Incorporated or Qualified

**07/07/1994**

3a. Date of Last Report

**07/11/1995**

4. FEI Number

**65-0505516**

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 s. 199.032,  
Florida Statutes ☐ Yes ☐ No

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 607.0602 and 607.1502, 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 607.0503, Florida Statutes.

SIGNATURE

NOTE: Registered Agents must complete this section.

DATE

12. OFFICERS AND DIRECTORS

12a. NAME ☐ DELETE  
**P DIAZ, HENRY**  
12b. STREET ADDRESS  
**10410 S.W. 56TH TERRACE**  
12c. CITY, ST., ZIP  
**MIAMI FL 33173**

12d. NAME ☐ DELETE  
**S DIAZ, MARIA E**  
12e. STREET ADDRESS  
**10410 S.W. 56TH TERRACE**  
12f. CITY, ST., ZIP  
**MIAMI FL 33173**

12g. NAME ☐ DELETE  
12h. STREET ADDRESS  
12i. CITY, ST., ZIP  
☐ DELETE

12j. NAME ☐ DELETE  
12k. STREET ADDRESS  
12l. CITY, ST., ZIP  
☐ DELETE

12m. NAME ☐ DELETE  
12n. STREET ADDRESS  
12o. CITY, ST., ZIP  
☐ DELETE

12p. NAME ☐ DELETE  
12q. STREET ADDRESS  
12r. CITY, ST., ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13a. TITLE ☐ Change ☐ Addition

13b. NAME

13c. STREET ADDRESS

13d. CITY, ST., ZIP

13e. TITLE

13f. NAME

13g. STREET ADDRESS

13h. CITY, ST., ZIP

13i. TITLE

13j. NAME

13k. STREET ADDRESS

13l. CITY, ST., ZIP

13m. TITLE

13n. NAME

13o. STREET ADDRESS

13p. CITY, ST., ZIP

13q. TITLE

13r. NAME

13s. STREET ADDRESS

13t. CITY, ST., ZIP

14. I 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 the corporation or the registered 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**MARIA E. DIAZ**

**JANUARY 30, 1996 305-596-1107**

DATE

PHONE NUMBER

CR2E034 (12/95)