


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Jul 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000050308 (3)

1. Corporation Name

AYALA CORPORATION



Principal Place of Business

4306 S.W. 24TH COURT
CAPE CORAL FL 33914

Mailing Address

4306 S.W. 24TH COURT
CAPE CORAL FL 33914

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/01/1994

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0560171

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

2. Principal Place of Business

21 418 Miramar Drive

Suite, Apt. #, etc.

22 City & State

23 Lakeland - FL

24 Zip

25 33803

Country

2a. Mailing Address

26 418 Miramar Drive

Suite, Apt. #, etc.

27 City & State

28 Lakeland - FL

29 Zip

30 33803

Country

9. Name and Address of Current Registered Agent

GUYAN, CHRISTLA A
4306 S.W. 24TH COURT
CAPE CORAL FL 33914

10. Name and Address of New Registered Agent

81 Name

82 Virginia Ayala

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

418 Miramar Drive

84 City

Lakeland

FL

85 Zip Code

33803

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

Christla A. Guyan

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

(NOTE: Registered Agent signature required when reinstating)

7-24-97

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME AYALA, VIRGINIA
STREET ADDRESS 418 MIRAMAR DRIVE
CITY-ST-ZIP LAKELAND FL

TITLE P ☒ DELETE

NAME GUYAN, CRISTLA A
STREET ADDRESS 4306 SW 24TH COURT
CITY-ST-ZIP CAPE CORAL FL

TITLE VP ☐ DELETE

NAME AYALA, HECTOR
STREET ADDRESS 704 LAKE SHORE DR.
CITY-ST-ZIP IMMOKALEE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☐ Change ☒ Addition

1.2 NAME Elizabeth Nichols
1.3 STREET ADDRESS 418 Miramar Dr.
1.4 CITY-ST-ZIP Lakeland - FL 33803

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 if changed, or on an attachment with an address.

SIGNATURE SIGNATURE REQUIRED

CR2E034 (4/97)