

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

CORPORATION
ANNUAL REPORT
1995



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

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DIVISION OF CORPORATIONS

DOCUMENT # P94000050603 (7)

1. Corporation Name

AMERICOR ENTERPRISES, INC.

Principal Place of Business

20138 NORTHWEST 58 PLACE
MIAMI FL 33015

Mailing Address

20138 NORTHWEST 58 PLACE
MIAMI FL 33015

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/08/1994

3a. Date of Last Report

95 MAY -1 PM 12:31

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

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30

9. Name and Address of Current Registered Agent

LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

Carmen L. Ruiz

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

20138 NW 58 PL

83

84 City

MIAMI

FL

85 Zip Code

33015

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

Carmen L. Ruiz

Carmen L. Ruiz

6/20/95

12. OFFICERS AND DIRECTORS

TITLE

P

NAME

RUIZ, DAVID J

STREET ADDRESS

20138 NORTHWEST 58 PLACE

CITY - ST - ZIP

MIAMI FL 33015

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

Carmen L. Ruiz

1.2 NAME

1.3 STREET ADDRESS

20138 N.W. 58 PL

1.4 CITY - ST - ZIP

MIAMI, FL 33015

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 119.07(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 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:

Carmen L. Ruiz

Carmen L. Ruiz

6/20/95

(305) 623-0971