

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000051871 (9)

1. Corporation Name

ALONSO PUBLISHING INC.



Principal Place of Business

Mailing Address

641 HAMPTON LN  
KEY BISCAIYNE FL 33149

P O BOX 161  
KEY BISCAIYNE FL 33149  
US

3. Date Incorporated or Qualified  
07/08/1994

3a. Date of Last Report  
04/17/1995

4. FEI Number

65-0519368

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

2. Principal Place of Business

21 260 CRANDON BLVD.

Suite, Apt #, etc

22 Suite 32-A

City & State

23 Key Biscayne, Florida

Zip

24 33149

Country

25 USA

2a. Mailing Address

26 260 CRANDON BLVD.

Suite, Apt #, etc

27 Suite 32-A

City & State

28 Key Biscayne, FL

Zip

29 33149

Country

30 USA

9. Name and Address of Current Registered Agent

ALONSO, ENRIQUE I  
641 HAMPTON LN  
KEY BISCAIYNE FL 33149

10. Name and Address of New Registered Agent

81 Name

Alonso, Enrique I.

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

260 CRANDON BLVD.

83

Suite 32-A

84

Key Biscayne

FL

85 Zip Code

33149

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

Signature of registered agent or authorized officer of corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

8-7-96

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

D

NAME

ALONSO, ENRIQUE I

STREET ADDRESS

641 HAMPTON LN

CITY - ST - ZIP

KEY BISCAIYNE FL 33149

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change

☐ Addition

1.1 TITLE

SAME

1.2 NAME

SAME

1.3 STREET ADDRESS

260 CRANDON BLVD., Suite 32-A

1.4 CITY - ST - ZIP

Key Biscayne, FL 33149

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

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 CITY - ST - ZIP

8.1 TITLE

8.2 NAME

8.3 STREET ADDRESS

8.4 CITY - ST - ZIP

9.1 TITLE

9.2 NAME

9.3 STREET ADDRESS

9.4 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 617, 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

Date

Printed Name

8-7-96

305-361-5033