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PROFIT
 CORPORATION
 ANNUAL REPORT

SIGNATURE:

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1997



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000062605 (8)

DIEGO C. ASENCIO & ASSOCIATES, INC.

Principal Place of Business Mailing Address 500 E. BROWARD BLVD. 500 E. BROWARD BLVD. **CHITE 1100** FT. LAUDERDALE FL 33394-3095 FT. LÁUDERDALE FL 33394 3. Date Incorporated or Qualified 3a. Date of Last Report 08/22/1994 05/01/1996 Principal Place of Business Mailing Address 4. FEI Number Applied For 65-0518809 Not Applicable 26 Suite, Apt. #, etc. Uite, \pt #, etc \$8.75 Additional 20 Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Ζip Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name **B1** MARULANDA A., CARLOS 500 E. BROWARD BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 1100 **B3** FT. LAUDERDALE FL 33394 84 Zip Code 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. -28-97 SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typied or printed name of registered agent and rice if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DO DELETE Change Addition TITLE 1.1 TITLE MARULANDA, CARLOS A NAME 1.2 NAME **668 STANTON DRIVE** STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33326 CITY-ST-ZIP 1.4 CITY - ST - ZIP DO DELETE Change Addition TITLE 2.1 TITLE ASENCIO, DIEGO C NAME 2.2 NAME 328 AUSTRALIAN AVENUE 2.3 STREET ADDRESS STREET ADDRESS PALM BEACH FL 33480 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE X Change ■ Addition TITLE 3.1 TITLE MARULANDA, PABLO A 3.2 NAME NAME 18444 N.W. NINTH COURT 2556 Jardin Lane STREET ADDRESS 3.3 STREET ADDRESS Fort Lauderdale FL PEMBROKE PINES FL 33029 33327 3.4. CITY - ST- ZIP CITY-ST-ZIP DO DELETE Change Addition 4.1 TITLE TITLE MARULANDA, CESAR A NAME 4. 2 NAME 694 STANTON DRIVE 4.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33326 0(1) Y - ST - ZIP 4.4 CITY - ST - ZIP Addition DELETE ☐ Change 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP Addition DELETE Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADORESS 6.3 STREET ADDRESS CHTY-ST-ZIP 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 changies, or on an attachment with an address.

<u>LIB FIEQUIRED</u>