

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000068073

1. Corporation Name

Hacienda El Eden, INC.

Principal Place of Business

Mailing Address

16585 SW 177 Ave
MIAMI, FL 33187

3. Date Incorporated or Qualified
9-15-94

3a. Date of Last Report
N/A

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc. 26. SAME

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. Zip

Country

29. Zip

Country

4. FEI Number

65-053177

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Sheridan K. Weissenborn, Esq.
PAPY & Weissenborn P.A.
201 Alhambra Circle Suite 502
Coral Gables, FL 33134

81. Name

CALIXTO JESUS GORDILLO

82. Street Address

16585 SW 177 Ave

83. City

MIAMI

FL

85. Zip Code

33187

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

CALIXTO JESUS GORDILLO

X

CALIXTO J. GORDILLO

4-24-96

12. OFFICERS AND DIRECTORS

TITLE: President
NAME: MARIA CAMPOS
STREET ADDRESS: 16585 SW 177 Ave
CITY, ST, ZIP: MIAMI FL 33187

TITLE: ☐ DELETE
NAME: ☐ DELETE
STREET ADDRESS: ☐ DELETE
CITY, ST, ZIP: ☐ DELETE

TITLE: ☐ DELETE
NAME: ☐ DELETE
STREET ADDRESS: ☐ DELETE
CITY, ST, ZIP: ☐ DELETE

TITLE: ☐ DELETE
NAME: ☐ DELETE
STREET ADDRESS: ☐ DELETE
CITY, ST, ZIP: ☐ DELETE

TITLE: ☐ DELETE
NAME: ☐ DELETE
STREET ADDRESS: ☐ DELETE
CITY, ST, ZIP: ☐ DELETE

TITLE: ☐ DELETE
NAME: ☐ DELETE
STREET ADDRESS: ☐ DELETE
CITY, ST, ZIP: ☐ DELETE

TITLE: ☐ DELETE
NAME: ☐ DELETE
STREET ADDRESS: ☐ DELETE
CITY, ST, ZIP: ☐ DELETE

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:

CALIXTO JESUS GORDILLO

CALIXTO J. GORDILLO

4-26-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature

CR2E034 (12/95)