

**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 # P94000070327 (9)

1. Corporation Name
URSULA, INC.



Principal Place of Business

Mailing Address

**3341 N.W. 18TH TERRACE
MIAMI FL 33125**

**3341 N.W. 18TH TERRACE
MIAMI FL 33125**

3. Date Incorporated or Qualified

3a. Date of Last Report

09/21/1994

12/14/1995

4. FEI Number

Applied For

65-0547623

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

2a. Mailing Address

21 **3341 N.W. 18th Terr.**

26 **Same**

Suite, Apt #, etc

Suite, Apt #, etc

22 City & State

27 City & State

23 **Miami, Fla. 33125**

28

24 Zip

25 Country

29 Zip

30 Country

33125

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LUGO, URSULA
3341 N.W. 18TH TERRACE
MIAMI FL 33125**

81 Name

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

83

84 City

FL

85

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.

SIGNATURE

Signature (typed or printed name of registered agent and the applicable (NOTE: Registered Agent's signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE

11 TITLE Change Addition

NAME **D LUGO, URSULA**
STREET ADDRESS **3341 N.W. 18TH TERRACE**
CITY - ST - ZIP **MIAMI FL 33125**

12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

TITLE DELETE

21 TITLE Change Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

TITLE DELETE

31 TITLE Change Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

TITLE DELETE

41 TITLE Change Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

TITLE DELETE

51 TITLE Change Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

TITLE DELETE

61 TITLE Change Addition

NAME
STREET ADDRESS
CITY - ST - ZIP

62 NAME
63 STREET ADDRESS
64 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:

Ursula Lugo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-14-96 305-637-9379

CR2E034 (3/96)