

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY - 1 AM 9:54

DOCUMENT # **P94000070986 (2)**

1. Corporation Name

ASCAR GROUP CORPORATION

Principal Place of Business

~~901 PONCE DE LEON BLVD.
SUITE 304
CORAL GABLES FL 33134~~

Mailing Address

~~901 PONCE DE LEON BLVD.
SUITE 304
CORAL GABLES FL 33134~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/27/1994

3a. Date of Last Report

2. Principal Place of Business

21 **9475 N.W. 89th Ave.**

2a. Mailing Address

26 **P.O. Box 2372**

4. FEI Number

65-0531072

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 delinquencies under S. 159.032, Florida Statutes

Yes

No

Suite, Apt. #, etc.

22 **Miami F.I. 33178**

Suite, Apt. #, etc.

27 **Miami F.I.**

City & State

23 **MIAMI FL**

City & State

28 **MIAMI FL U.S.A.**

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

**MENDEZ, SERGIO L
901 PONCE DE LEON BLVD.
SUITE 304
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

B1 Name **A. VARA.**
B2 Street Address (P.O. Box Number is Not Acceptable) **9475 N.W. 89th Ave.**
B3
B4 City **MIAMI** FL B5 Zip Code **33178**

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 607.0500, Florida Statutes.

SIGNATURE

[Signature]

[Signature] 4/14/95

12. OFFICERS AND DIRECTORS

TITLE	PRSD
NAME	VARA, A.D.
STREET ADDRESS	901 PONCE DE LEON BLVD., SUITE 304
CITY ST ZIP	CORAL GABLES FL 33134
TITLE	VIC-PRESIDENT
NAME	A. ALBERTO VARA
STREET ADDRESS	9475 N.W. 89 AVE
CITY ST ZIP	MIAMI, FL. 33178
TITLE	SECRETARY
NAME	CARLOS A. VARA
STREET ADDRESS	9475 N.W. 89 AVE
CITY ST ZIP	MIAMI, FL 33178
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
1.2 NAME			
1.3 STREET ADDRESS	555 ARVIDA PKWAY		
1.4 CITY ST ZIP	C. GABLES FL. 33156		
2.1 TITLE		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY ST ZIP			
3.1 TITLE		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY ST ZIP			
4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY ST ZIP			
5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY ST ZIP			
6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY ST ZIP			

REMITTED BY MAY 1

14. I do hereby certify that the information supplied with this filing was voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature] 4/14/95 (SOS) 825 6047