FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
'95 MAR -2 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000072484 (6)**

1. Corporation Name
AMAZONAS MIAMI, INC.

Principal Place of Business	Mailing Address
1941 S.W. 8TH STREET MIAMI FL 33135	1941 S.W. 8TH STREET MIAMI FL 33135

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 09/29/1994
3a. Date of Last Report:

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: 65-0527943 ☐ 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

SINSKI, MARGARITA E
11014 S.W. 137TH COURT
MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name: PABLO SEVILLA
82 Street Address (P.O. Box Number is Not Acceptable): 9375 FOUNTAINBLEAU BLVD APT. L-317
83
84 City: MIAMI FL 85 Zip Code: 33172

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: Pablo Sevilla
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	P/D XX Change ☐ Addition
NAME	SINSKI, MARGARITA E	1.2 NAME	CLELIA SEVILLA
STREET ADDRESS	11014 S.W. 137TH COURT	1.3 STREET ADDRESS	9375 FOUNTAINBLEAU BLVD. # L-317
CITY-ST-ZIP	MIAMI FL 33186	1.4 CITY-ST-ZIP	MIAMI, FL 33172
TITLE	VD	2.1 TITLE	T/D XX Change ☐ Addition
NAME	SINSKI, JEFFREY A	2.2 NAME	PABLO SEVILLA
STREET ADDRESS	11014 S.W. 137TH COURT	2.3 STREET ADDRESS	9375 FOUNTAINBLEAU BLVD, # L-317
CITY-ST-ZIP	MIAMI FL 33186	2.4 CITY-ST-ZIP	MIAMI, FL 33172
TITLE		3.1 TITLE	S XX Change ☐ Addition
NAME		3.2 NAME	XAVIER SEVILLA
STREET ADDRESS		3.3 STREET ADDRESS	9375 FOUNTAINBLEAU BLVD. # 1-317
CITY-ST-ZIP		3.4 CITY-ST-ZIP	MIAMI, FL 33172
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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)(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 changed, or on an attachment with an address.

SIGNATURE: PABLO SEVILLA Pablo Sevilla FEB. 23, 1995 (305)541-6160
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL

0142000 CP