FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
SUNDA H. MORTON
SECRETARY OF STATE
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 NOV -1 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000073742 (6)**

1. Corporate Name
MAREVA DISTRIBUTORS, INC.

Principal Place of Business
820 N.W. 133RD AVENUE
MIAMI FL 33182

Mailing Address
820 N.W. 133RD AVENUE
MIAMI FL 33182

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/07/1994
3a. Date of Last Report:

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # etc. — 22 / 27
City & State — 23 / 28
City — 24 / County — 25 / Zip — 29 / Country — 30

4. FEI Number: 65-0529169 — 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 already filed for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FERNANDEWZ-ESNARD, YVONNE M
820 N.W. 133RD AVENUE
MIAMI FL 33182

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City — FL — 05 Zip Code

11. Pursuant to the provisions of Section 607.0501 and/or 617.0193, 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 hereby accept the obligations of Section 607.0501, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

PRESIDENT / SECRETARY
YVONNE M. FERNANDEZ-ESNARD
820 N.W. 133RD AVE
MIAMI, FL. 33182

VICE PRESIDENT / TREASURER
MARTA C. CABRERA
820 N.W. 133RD AVE
MIAMI, FL 33182

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall serve as my resignation as registered agent if it is the only position held by me with the corporation. I further certify that I am familiar with and shall comply with the provisions of Chapter 607, Florida Statutes, and that my name appears above, or on an attached amendment, or on a separate document with an original signature.

SIGNATURE: April 10, 1995 — 223-5640

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0207466 CP