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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000074330 (9)
1. Corporation Name
D.M.S OF MIAMI INC.

500001445035
-03/31/95--01048--005
****208.75 ****208.75

Principal Place of Business Mailing Address
6800 S.W 40th STREET SUITE # 177 MIAMI FL. 33155

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Return	
21 State, Apt. #, etc.		26 State, Apt. #, etc.		09/26/1994			
22 City & State		27 City & State		4. FEI Number		Approved For	
23 Zip		28 Zip		65-0523765		Not Applicable	
24 Country		29 Country		5. Certificate of Status Desired		X \$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			
PEREZ CARLOS 6800 S.W 40th ST. SUITE # 177 MIAMI FL 33155				81 Name ALBERTO AGUIRRE			
				82 Street Address (P.O. Box Number is Not Acceptable) 6800 S.W 40th STREET # 177			
				83			
				84 City MIAMI, FL 85 Zip Code 33155			

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 agent, and hereby accepts the obligations of Section 607.0504, Florida Statutes.

SIGNATURE: *[Signature]* 03-28-1995

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12	
1101 NAME D PEREZ CARLOS	1102 STREET ADDRESS 6800 S.W 40th. ST # 177	1103 CITY, ST, ZIP MIAMI FL 33155	1104
1105 NAME	1106 STREET ADDRESS	1107 CITY, ST, ZIP	1108
1109 NAME	1110 STREET ADDRESS	1111 CITY, ST, ZIP	1112
1113 NAME	1114 STREET ADDRESS	1115 CITY, ST, ZIP	1116
1117 NAME	1118 STREET ADDRESS	1119 CITY, ST, ZIP	1120
1121 NAME	1122 STREET ADDRESS	1123 CITY, ST, ZIP	1124
1125 NAME	1126 STREET ADDRESS	1127 CITY, ST, ZIP	1128
1129 NAME	1130 STREET ADDRESS	1131 CITY, ST, ZIP	1132
1133 NAME	1134 STREET ADDRESS	1135 CITY, ST, ZIP	1136
1137 NAME	1138 STREET ADDRESS	1139 CITY, ST, ZIP	1140
1141 NAME	1142 STREET ADDRESS	1143 CITY, ST, ZIP	1144
1145 NAME	1146 STREET ADDRESS	1147 CITY, ST, ZIP	1148
1149 NAME	1150 STREET ADDRESS	1151 CITY, ST, ZIP	1152
1153 NAME	1154 STREET ADDRESS	1155 CITY, ST, ZIP	1156
1157 NAME	1158 STREET ADDRESS	1159 CITY, ST, ZIP	1160
1161 NAME	1162 STREET ADDRESS	1163 CITY, ST, ZIP	1164
1165 NAME	1166 STREET ADDRESS	1167 CITY, ST, ZIP	1168
1169 NAME	1170 STREET ADDRESS	1171 CITY, ST, ZIP	1172
1173 NAME	1174 STREET ADDRESS	1175 CITY, ST, ZIP	1176
1177 NAME	1178 STREET ADDRESS	1179 CITY, ST, ZIP	1180
1181 NAME	1182 STREET ADDRESS	1183 CITY, ST, ZIP	1184
1185 NAME	1186 STREET ADDRESS	1187 CITY, ST, ZIP	1188
1189 NAME	1190 STREET ADDRESS	1191 CITY, ST, ZIP	1192
1193 NAME	1194 STREET ADDRESS	1195 CITY, ST, ZIP	1196
1197 NAME	1198 STREET ADDRESS	1199 CITY, ST, ZIP	1200

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption provided in the laws of the State of Florida. I further certify that the information was placed on this annual report or supplemental annual report is true and accurate and that my signature shall be on the document after I read and understand the contents, that I am an officer or director of the corporation or the record or listing empowered to execute this report as required by Chapter 442, Florida Statutes, and that my name appears in Block 12 or Block 13 or Block 14, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* Alberto Aguirre President 03-28-95 (305) 859-9534