FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000084121 (0)**

1. Corporation Name

CAAP INTERNATIONAL CORPORATION

Principal Place of Business	Mailing Address
8117 N.W. 60TH ST. MIAMI FL 33166 US	8117 N.W. 60TH AVE. MIAMI FL 33166 US

3. Date Incorporated or Qualified: 11/17/1994

3a. Date of Last Report: 05/01/1995

2. Principal Place of Business
21: 8579 N.W. 54th ST.
22: Suite, Apt. #, etc.
23: City & State: MIAMI, FL
24: Zip: 33166
25: Country: USA

2a. Mailing Address
26: 8579 N.W. 54th ST.
27: Suite, Apt. #, etc.
28: City & State: MIAMI, FL.
29: Zip: 33166
30: Country: USA

4. FEI Number: 65-0534172 ☐ 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

RIVERA Y DE PIEROLA , CARMEN Y
8117 N.W. 60TH ST.
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable): 8579 N.W. 54th STREET

83

84 City: MIAMI FL 85 Zip Code: 33166

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 _____ DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☐ DELETE	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	RIVERA Y DE PIEROLA , CARMEN		1.2 NAME	RIVERA Y DE PIEROLA, CARMEN	
STREET ADDRESS	8117 N.W. 60TH ST.		1.3 STREET ADDRESS	8579 N.W. 54th ST.	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	MIAMI, FL 33166	
TITLE	VS	☐ DELETE	2.1 TITLE	VS	☒ Change ☐ Addition
NAME	RIVERA Y DE PIEROLA , ALBERTO		2.2 NAME	RIVERA Y DE PIEROLA, ALBERTO	
STREET ADDRESS	8117 N.W. 60TH STREET		2.3 STREET ADDRESS	8579 N.W. 54th STREET	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	MIAMI, FL 33166	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	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 added by an attachment with an address.

SIGNATURE: _____ Carmen Rivera y de Pierola 04-09-96 (305)594-4900

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

CR2E034 (12/95)