

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

50 MAY 20 PM 2:02

DEPT. OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000091930 (5)

1. Corporation Name:

RENOR SERVICE CORP.

Principal Place of Business:

7411 SW 152ND AVENUE STE. 206
MIAMI FL 33193

Mailing Address:

7411 SW 152ND AVENUE STE. 206
MIAMI FL 33193

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

12/21/1994

4. FEI Number Applied For
65-0541471 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

2. Principal Place of Business:

21

State Apt # etc

22

City & State

23

Zip

Country

24

2a. Mailing Address:

26

State Apt # etc

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CALLEJA, AUGUSTO
7411 SW 152ND AVENUE STE. 206
MIAMI FL 33193

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0302 and 607.1508, Florida Statutes, the above named corporation submits the 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 607.0305, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or New Registered Agent)

(Signature of Registered Agent or New Registered Agent)

(Signature of Registered Agent or New Registered Agent)

12. OFFICERS AND DIRECTORS

13. ADDITIONAL OFFICERS, DIRECTORS, AND REGISTERED AGENTS

NAME D
CALLEJA, AUGUSTO
C/O 7411 SW 152ND AVENUE STE. 206
MIAMI FL 33193

NAME
STREET ADDRESS
CITY, ST, ZIP

NAME
STREET ADDRESS
CITY, ST, ZIP

NAME
STREET ADDRESS
CITY, ST, ZIP

NAME
STREET ADDRESS
CITY, ST, ZIP

NAME
STREET ADDRESS
CITY, ST, ZIP

1. NAME ☐ Change ☐ Add/Remove

2. NAME ☐ Change ☐ Add/Remove

3. STREET ADDRESS ☐ Change ☐ Add/Remove

4. CITY, ST, ZIP ☐ Change ☐ Add/Remove

5. NAME ☐ Change ☐ Add/Remove

6. STREET ADDRESS ☐ Change ☐ Add/Remove

7. CITY, ST, ZIP ☐ Change ☐ Add/Remove

8. NAME ☐ Change ☐ Add/Remove

9. STREET ADDRESS ☐ Change ☐ Add/Remove

10. CITY, ST, ZIP ☐ Change ☐ Add/Remove

11. NAME ☐ Change ☐ Add/Remove

12. STREET ADDRESS ☐ Change ☐ Add/Remove

13. CITY, ST, ZIP ☐ Change ☐ Add/Remove

14. NAME ☐ Change ☐ Add/Remove

15. STREET ADDRESS ☐ Change ☐ Add/Remove

16. CITY, ST, ZIP ☐ Change ☐ Add/Remove

17. NAME ☐ Change ☐ Add/Remove

18. STREET ADDRESS ☐ Change ☐ Add/Remove

19. CITY, ST, ZIP ☐ Change ☐ Add/Remove

20. NAME ☐ Change ☐ Add/Remove

21. STREET ADDRESS ☐ Change ☐ Add/Remove

22. CITY, ST, ZIP ☐ Change ☐ Add/Remove

23. NAME ☐ Change ☐ Add/Remove

24. STREET ADDRESS ☐ Change ☐ Add/Remove

25. CITY, ST, ZIP ☐ Change ☐ Add/Remove

14. I, the undersigned, certify that the information supplied with this form is voluntarily furnished and does not qualify for the exemption stated in Section 199.032(4)(b), Florida Statutes. I further certify that the information supplied 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 this corporation or the precursor or successor organization to conduct this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report. I can be contacted at the address:

SIGNATURE:

(Signature and Typed Name of Signing Officer or Director)

4/26/95

(305) 386-2320