

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000006468 (9)

1. Corporation Name

SINAL VERDE INC.



Principal Place of Business

1 N.E. 1ST STREET
#3E-3D
MIAMI FL 33132

Mailing Address

1 N.E. 1ST STREET
#3E-3D
MIAMI FL 33132

2. Principal Place of Business

21 Suite, Apt. #, etc.
22 316
23 City & State

24 Zip
25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.
27 316
28 City & State

29 Zip
30 Country

9. Name and Address of Current Registered Agent

RUIZ, DINEY
1 N.E. 1ST STREET
#3E-3D
MIAMI FL 33132

3. Date Incorporated or Qualified
01/25/1995

3a. Date of Last Report

4. FEI Number

65-0550947

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

10. Name and Address of New Registered Agent

81 Name

RUIZ, DINEY

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

1 N.E. 1st Street

83

3E-3D

84 City

Miami

FL

85 Zip Code

33132

11. Pursuant to the provisions of Sections 607.0501 and 607.1501, 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 607.0501, Florida Statutes.

SIGNATURE

[Signature]

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	RUIZ, DINEY	
STREET ADDRESS	3245 VIRGINIA ST. #61	
CITY-ST-ZIP	COCONUT GROVE FL 33132	
TITLE	D	☒ DELETE
NAME	SANTOS, CARLOS D	
STREET ADDRESS	7863 S.W. 106TH CIRCLE	
CITY-ST-ZIP	KENDALL FL 33173	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY-ST-ZIP	☐ Change ☐ Addition
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY-ST-ZIP	☐ Change ☐ Addition
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY-ST-ZIP	☐ Change ☐ Addition
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY-ST-ZIP	☐ Change ☐ Addition
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY-ST-ZIP	☐ Change ☐ Addition

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)(k), 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 registered 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 changes, or an appointment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-96

(305) 373-3255

CR2E034 (12/95)