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Feb 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000013249 (4)

1. Corporation Name
OCEAN ELECTRIC ASSOCIATES, INC.



Principal Place of Business

1410-20TH STREET
SUITE 217
MIAMI BEACH FL 33139

Mailing Address

1410-20TH STREET
SUITE 217
MIAMI BEACH FL 33139-1444

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

02/16/1995

3a. Date of Last Report

06/14/1996

4. FEI Number

65-0577271

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

ALONSO, DOMINGO
301 ALMERIA STE 220
SUITE 217
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name Bautista, Jose
82 Street Address (P.O. Box Number is Not Acceptable)
6627 NW 173 LN.

84 City Miami Lakes

FL 85 Zip Code 3

11. Pursuant to the provisions of Sections 607.0503 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	BAUTISTA, JOSE	
STREET ADDRESS	6627 NW 173 LN	
CITY - ST - ZIP	MIAMI LAKES FL	
TITLE	SVD	DELETE
NAME	PORTALES, JOSE	
STREET ADDRESS	1410-20TH STREET, SUITE 217	
CITY - ST - ZIP	MIAMI BEACH FL 33139	
TITLE	TD	DELETE
NAME	VARGAS, FERNANDO	
STREET ADDRESS	1410-20TH STREET, SUITE 217	
CITY - ST - ZIP	MIAMI BEACH FL 33139	
TITLE	D	DELETE
NAME	ARCE, GERARDO	
STREET ADDRESS	1410-20TH STREET, SUITE 217	
CITY - ST - ZIP	MIAMI BEACH FL 33139	
TITLE	D	DELETE
NAME	MOOG, CESAR	
STREET ADDRESS	1410-20TH STREET, SUITE 217	
CITY - ST - ZIP	MIAMI BEACH FL 33139	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)