

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

FILED  
Apr 19 1996 8:00 am  
Secretary of State

DOCUMENT # P95000016996 (7)

1. Corporation Name

ARGOS IS MIAMI, INC.



Principal Place of Business

Mailing Address

11401 S.W. 40TH STREET  
#334  
MIAMI FL 33165

11401 S.W. 40TH STREET  
#334  
MIAMI FL 33165

3. Date Incorporated or Qualified

03/01/1995

3a. Date of Last Report

4/15/96

2. Principal Place of Business

2a. Mailing Address

21 11401 SW, 40 St.,

26 11401 SW, 40 St.,

4. FEI Number

65-0559337

Applied For

Not Applicable

22 Suite, Apt. #, etc.

#334,

27 Suite, Apt. #, etc.

#334,

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

23 City & State

Miami, Fl. 33165

28 City & State

Miami, Fl. 33165

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

24 Zip

25 Country

29 Zip

30 Country

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

CONCEPCION, MARCOS J  
14334 S.W. 96TH TERRACE

MIAMI FL 33186

81 Name

Marcos Concepcion

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

14334 SW, 96 Terrace,

83

84 City

Miami,

FL

85 Zip Code  
33186

11. Pursuant to the provisions of Sections 607.0102 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 agent, and title if applicable

Marcos Concepcion

4/15/96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE  
NAME CONCEPCION, MARCOS J  
STREET ADDRESS 14334 S.W. 96TH TERRACE  
CITY - ST - ZIP MIAMI FL 33186

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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STREET ADDRESS  
CITY - ST - ZIP

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 Vice-President.  
2.3 STREET ADDRESS Armando A. Garcia  
2.4 CITY - ST - ZIP 189 Carlisle Dr., Miami Spring,  
Fl. 33166.

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 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 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

MARCOS CONCEPCION 4/15/96 (305) 383-8405

CR2E034 (12/95)