

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

1996 MAY -9 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000020434 (3)

1. Corporation Name

S & M INTERNATIONAL CORP.



Principal Place of Business

6710 NORTHWEST 192 TERRACE
MIAMI FL 33015

Mailing Address

6710 NORTHWEST 192 TERRACE
MIAMI FL 33015

2. Principal Place of Business

21 2730 NW 21 Terrace

Suite, Apt. #, etc.

22

City & State

23 Miami, Florida

Zip

33142

Country

25 Dade

2a. Mailing Address

26 2730 NW 21 Terrace

Suite, Apt. #, etc.

27

City & State

28 Miami, Florida

Zip

29 33142

Country

30 Dade

3. Date Incorporated or Qualified

03/14/1995

3a. Date of Last Report

4. FET Number

65-0563660

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

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

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 607.02(1) and 607.1506, 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 duties of, the provisions of 607.02(1) and 607.1506, Florida Statutes.

SIGNATURE

By: *Natalia Lizaro*

Vice President

5/8/96

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P, S, T, D

LIZARDO, SIMON D

6710 NORTHWEST 192 TERRACE

MIAMI FL 33015

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

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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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 8, 1996

CR2E034 (12/95)