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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

2. Principal Place of Business

Suite, Apt. #, etc.

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P95000021978 (8)								
FORREST INVESTMENTS, INC.									
Principal Place of Business	Mailing Address								
3820 S.W. 138TH AVENUE MIAMI FL 33175	3820 S.W. 138TH AVENUE MIAMI FL 33175								

2a. Mailing Address

Suite, Apt. #, etc.



ø

3a. Date of Last Report

Applied For

Fee Required

Not Applicable \$8,75 Additional

3. Date Incorporated or Qualified

5. Certificate of Status Desired

03/17/1995 4. FEI Number

		27						6E 00		
2 Citý & State 3			City & State				6. Election Campaign Financing Trust Fund Contribution	* -	May Be to Fees	
		28					B. This corporation has liability for intangible tax to			
Zip	Country	L.,	Zip	_	ountry		Florida Statutes Yes No			
	25	29		30	 		10. Name and Address of New Registered Ag	ent		
25 29 30 30 30 9. Name and Address of Current Registered Agent					B1	Name				
•				Ш		D. C. D. Attended in Not Accordance				
ESTEFANO, RODOLFO M					82	82 Street Address (P.O. Box Number is Not Acceptable)				
3820 S.W. 138TH AVENUE MIAMI FL 33175				83						
							85 Zip	Code		
					84	City	<u>FL</u>			
	istance of Continue 607 050	2 and f	307 1508. Florida Statu	tes, the a	bove	named corpor	ration submits this statement for the purpose of chan rd of directors. I hereby accept the appointment as re	ging its re oistered	gistered offi agent. I am	
 Pursuant to or registered 	agent, or both, in the State of Flor	ida Su	ch change was authori	zed by th	e corp	oration's boar	ration submits this statement for the purpose of criain rd of directors. I hereby accept the appointment as re	9.0.0.0	-3	
familiar with	agent, or both, in the State of Flor and accept the obligations of, Sec	tion 60	7.0000, Florida Statute							
GNATURE	gnature, typed or printed name of registered ager	nt and title	if applicable. (N	IOTE: Regist	ered Age	nt signature require	d when reinstating! DATE	VIDECTO	RS IN 12	
	OFFICERS AN	ND DIR	ECTORS	1	3.		ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition	
ILE T	D		☐ DELETE	1	. TITLE		ب ا	O	_	
AME	ESTEFANO, RODOLFO			1	.2 NAME	ļ				
TREET ADDRESS	3820 S.W. 138TH AVENUE			1	3 STREE	T ADDRESS				
IY-ST-ZIP	MIAMI FL 33175				.4 CITY -		Г	Change	Additio	
TLE			DELETE		TITLE	1			_	
AME					2 NAME					
TREET ADDRESS				1		T ADDRESS				
HTY-ST-ZIP			E DELETE		CITY-) Change	☐ Additio	
ITLE			☐ DELETE		3.2 NAM	,				
NAME					1	ET ADDRESS				
STREET ADDRESS					3 p. 31 no 3.4 CITY		20000180248	32		
CITY-ST-ZIP			DELETE		4.1 TITL		20000180248 -05701795010150]] Change	Addition Addition	
TITLE			L) bleen		42 NAM		***208.7S			
NAME				1	13 STR8	ET ADDRESS				
STREET ADDRESS					1	-ST-ZiP			- 140°	
CITY-ST-ZIP			DELETE		5, 1 TITL] Change	☐ Additi	
TITLE				1	5.2 NAM	E				
NAME PARKET ADDRESS				•	5 3 STR	EET ADDRESS				
STREET ADDRESS				1	54 CITY	- ST- 2IP		Change	☐ Additi	
CITY-ST-ZIP TITLE			☐ DELETE		6.1 TIT	.E	ι	_1 change	LJ Noon	
NAME				Į	62 NAM	AE				
STREET ADDRESS				- 1	\$3 STR	EET ADDRESS				
	1				64 CIT	Y-ST-ZIP	y for the exemption stated in Section 119.07(3)(k), Flucrate and that my signature shall have the same legaths report as required by Chapter 607, Florida Statu	orida Stat	utes. I furthe	