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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000028226 (5)

DOCUMENT #
1. Corporation Name MADRID ASSOCIATES, INCORPORATED

	•						
Principal Place of Business Mailing Address					MB110 11201 10112 11418 11419 11419 0111 1881		
2351 THOMAS STREET 2351 THOMAS S' HOLLYWOOD FL 33020 HOLLYWOOD FL							
					3. Date Incorporated or Qualified 3a. 04/10/1995	Date of Last Report	
2. Principal Place	ice of Business	2a. Mailing Address			4. FEI Number 65-0588019	Applied For Not Applicable	
Suite, Apt. #	I, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Coun	try	8. This corporation has liability for intangent Florida Statutes X Yes N	No .	
	Name and Address of Curren	t Registered Agent			10. Name and Address of New Registe	ered Agent	
				31 Name			
Gabriel, Alan L ESQ. 2455 E. Sunrise BLVD.			Ī	32 Street Add	reet Address (P.O. Box Number is Not Acceptable)		
	IOUSE EAST			33			
	LAUDERDALE FL 33304		1	84 City		FL 85 Zip Code	
or registere familiar witi	ed agent, or both, in the State of Florid th, and accept the obligations of, Sect	da. Such change was author ion 607.0505, Florida Statute	ized by the co	e-named corpo orporation's boa	ration submits this statement for the purpose ard of directors. I hereby accept the appointme	of changing its registered office ent as registered agent. I am	
SIGNATURE	Signature typed or printed name of registered agent			lgent signature require	50 11 5 7 1 5 1 5 1 5 1 5 1 5 1 5 1 5 1 5	ATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS	Change Addition	
TITLE	DPVT	DELETE				C publife C Magnon	
NAME	LUGO, FELIX A A JR.		1.2 NA	1			
STREET ADDRESS	1920 NW 41 SSTREET FORT LAUDERDALE FL 33	200		EET ADDRESS			
CITY-ST-ZIP	DS PORT LAUDERDALE PL 354	DELETE	2. 1 TU	Y-ST-ZIP		Change Addition	
TITLE		[] been	2.110 22 NA				
NAME	HERRMANN, ARTHUR F 2351 THOMAS STREET			REET ADDRESS			
STREET ADDRESS	HOLLYWOOD FL 33020			Y-\$1-ZIP			
CHY-ST-ZiP TITLE	HOLLITTOOD I E OOVEO	DELFTE	3. 1 Tr			Change Addition	
			3 2 NA	Ì			
NAME STREET ADDRESS				REET ADDRESS			
				Y-\$1-ZIP			
CITY-ST-ZIP		☐ DELETE	4. 1 11			☐ Change ☐ Addition	
NAME			4.2 NA	ME			
STREET ADDRESS				REET ADDRESS			
CHY-ST-7/P				Y-S1-ZIP			
TITLE		☐ DELETE	5. 1 Ti			Change Addition	
NAME		-	5 2 NA	ME			
STREET ADDRESS	1			REET ADDRESS			
CITY-S1-ZIP				Y-S1-ZIP			
TITLE		[] DELETE	6 1 11			Change Addition	
NAME		.	6.2 NA				
STREET ADDRESS				REET ADDRESS			
aintti annutag	1		1 5561				

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 early; 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. OFFICER OF OFFICER OFFIC

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

CARRIERA DER ARIER AUCH BRUCK BRUCK BRUCK BRUCK ARIER 11881 1818 1818 1818 BRUCK BRUCK BRUCK