

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000028645 (6)

1. Corporation Name

HABRON PROPERTY MANAGEMENT SERVICES USA, INC.



Principal Place of Business

2661 AIRPORT ROAD, SOUTH
SUITE B104
NAPLES FL 33962

Mailing Address

2661 AIRPORT ROAD, SOUTH
SUITE B104
NAPLES FL 33962

2. Principal Place of Business

21 2661 Airport Rd. South

Suite, Apt. #, etc.

22 Suite B101

City & State

23 Zip

25 Country

24

2a. Mailing Address

26 2661 Airport Road South

Suite, Apt. #, etc.

27 Suite B101

City & State

28 Zip

30 Country

29

3. Date Incorporated or Qualified

04/10/1995

3a. Date of Last Report

N/A

4. FEI Number

65 0575684

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$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

CARVALLO, SYLVIE
2661 AIRPORT ROAD, SOUTH
SUITE B104
NAPLES FL 33962

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 607.0502 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, Sections 607.0505, Florida Statutes.

SIGNATURE

[Signature]

2/16/96

12. OFFICERS AND DIRECTORS

1. TITLE D
NAME CARVALLO, SYLVIE
STREET ADDRESS 2661 AIRPORT ROAD, SOUTH, SUITE B104
CITY-STATE-ZIP NAPLES FL 33962

☐ DELETE

2. TITLE D
NAME CLARENCE, BRIAN
STREET ADDRESS 2661 AIRPORT ROAD, SOUTH, SUITE B104
CITY-STATE-ZIP NAPLES FL 33962

☐ DELETE

3. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

4. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

5. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

6. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 2661 Airport Rd s. Suite B101
1.4 CITY-STATE-ZIP

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 2661 Airport Rd South. B101
2.4 CITY-STATE-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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. I am attaching _____ with an address _____

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/16/96 (941) 775 5890

CR2E034 (12/95)