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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000030973 (8)

1. Corporation Name

MACAMBILA, INC.

Principal Place of Business

3780 WEST FLAGLER STREET
MIAMI FL 33134

Mailing Address

3780 WEST FLAGLER STREET
MIAMI FL 33134

2. Principal Place of Business

21

State, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

State, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

RODRIGUEZ-BETANCOURT, MIGUEL ESQ.
3780 WEST FLAGLER STREET
MIAMI FL 33134

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 Section 607.01, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am

and 607.01(2)(a), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office and change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETE
NAME	BARCOS, CARLOS	
STREET ADDRESS	3780 WEST FLAGLER STREET	
CITY-STATE-ZIP	MIAMI FL 33134	
TITLE	VD	DELETE
NAME	MARTINEZ, HIPOLITO	
STREET ADDRESS	3780 WEST FLAGLER STREET	
CITY-STATE-ZIP	MIAMI FL 33134	
TITLE	TD	DELETE
NAME	ARRIETA, JOSE J	
STREET ADDRESS	3780 WEST FLAGLER STREET	
CITY-STATE-ZIP	MIAMI FL 33134	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	Change	Addition
2. NAME		
3. STREET ADDRESS		
4. CITY-STATE-ZIP		
5. TITLE	Change	Addition
6. NAME		
7. STREET ADDRESS		
8. CITY-STATE-ZIP		
9. TITLE	Change	Addition
10. NAME		
11. STREET ADDRESS		
12. CITY-STATE-ZIP		
13. TITLE	Change	Addition
14. NAME		
15. STREET ADDRESS		
16. CITY-STATE-ZIP		
17. TITLE	Change	Addition
18. NAME		
19. STREET ADDRESS		
20. CITY-STATE-ZIP		

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***200.00

14. I do hereby certify that the information supplied with this filing is your own, is true and correct, and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on the annual report is true and correct 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 of the corporation; and that my name appears in Block 12 or Block 13 if changed, or on an attached statement with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-96

SCF 3-30-96

CR2E034 (12/95)