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Jan 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000037976 (4)

1. Corporation Name
ORANGETREE BLOSSOM, INC.

Principal Place of Business
1657 WEST 39TH PLACE
HIALEAH FL 33012-7014

Mailing Address
1657 WEST 39TH PLACE
HIALEAH FL 33012-7014



3. Date Incorporated or Qualified
05/12/1995
3a. Date of Last Report
05/01/1996
4. FEI Number
65-0587654
Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

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

10. Name and Address of New Registered Agent

BIRNBAUM, MARC
20801 BISCAYNE BLVD.
SUITE 400
MIAMI FL 33180

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, Section 607.0505, Florida Statutes.

SIGNATURE

(Signature type the printed name of registered agent and dated applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME GLUCK, MAURICIO
STREET ADDRESS 1630 WEST 38TH PLACE
CITY-ST-ZIP HIALEAH FL 33012

11 TITLE PLES ☒ Change ☐ Addition
12 NAME MAURICIO GLUCK
13 STREET ADDRESS 1657 WEST 39TH PLACE
14 CITY-ST-ZIP HIALEAH FL 33012

TITLE D ☒ DELETE
NAME DUNAIEVSKY, DOV
STREET ADDRESS 1674 MERIDIAN AVE. #408
CITY-ST-ZIP MIAMI BEACH FL 33139

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

31 TITLE SEC ☐ Change ☒ Addition
32 NAME ROGER A CABRERA
33 STREET ADDRESS 1655 WEST 39TH PLACE
34 CITY-ST-ZIP HIALEAH FL 33012

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address.

SIGNATURE: Mauricio Gluck, Pres
SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/97 305 8226100
Date Daytime Phone #

0118590

CR2E034 (9/96)