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Apr 09 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 # P95000039587 (7)

1. Corporation Name

BERENGUER CONSULTING, INC.



Principal Place of Business

2801 PONCE DE LEON BLVD.  
SUITE 270  
CORAL GABLES FL 33134

Mailing Address

2801 PONCE DE LEON BLVD.  
SUITE 270  
CORAL GABLES FL 33134-6917

3. Date Incorporated or Qualified

05/18/1995

3a. Date of Last Report

01/23/1996

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

4. FEI Number

65-0597443

Applied For  
Not Applicable

6. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

8. 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

BERENGUER, JOSE M III  
2801 PONCE DE LEON BLVD.  
SUITE 270  
CORAL GABLES FL 33134

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, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: Typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~DR~~ ☐ DELETE  
NAME BERENGUER, JOSE M.  
STREET ADDRESS 1111 CRANDON BLVD., APT. C-501  
CITY-ST-ZIP KEY BISCAIYNE FL

TITLE ~~DR~~ ☐ DELETE  
NAME BERENGUER, MARTA P  
STREET ADDRESS 1111 CRANDON BLVD. APT. C-501  
CITY-ST-ZIP MIAMI FL 33149

TITLE ~~DR~~ ☐ DELETE  
NAME BERENGUER, JOSE M III  
STREET ADDRESS 7740 S.W. 70 ST.  
CITY-ST-ZIP MIAMI FL 33143

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Director, J.P. ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE Treasurer ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE Director, President ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE Secretary ☐ Change ☒ Addition  
4.2 NAME Ana M. Berenguer  
4.3 STREET ADDRESS 7740 SW 70 St.  
4.4 CITY-ST-ZIP Miami, Florida 33143

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/4/97

(305) 444-6035

Date

Daytime Phone #

CR2E034 (9/96)