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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000043502 (0)

MARIACHI MEXICO INTERNATIONAL CORP.

FILED May 05 1997 8:00am Secretary of State



Principal Place of Business		Mailing Address						
1000 S.W. 104TH CT. #D-303 MIAMI FL 33174		1000 S.W. 104TH CT. #D-303 MIAMI FL 33174-2817						
				3. Date Incorporated or Qualified				
. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		A	pplied For
		26			65-0574142		N	ot Applicab
Suite, Apt. :	#, etc.	Suite, Apt #, etc.	· · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired			Additional
1		27			0. 0011100100			equired
City & State)	City & State			6. Election Campaign Financing	r		May Be
]		28	- Co.		Trust Fund Contribution			to Fees
71p]	Country	Zip	Cou	itry	8. This corporation has liability fo		ax under s No	s. 199.032,
L	25 9. Name and Address of Currer	29 Agent	30		Florida Statutes 10. Name and Address of New F			
MAG	RTINEZ, JOSE	it itagisters Agont		81 Name	19. Hallo did nooloss of Holi	iogiotoi ga ic	9011	
	0 S.W. 104TH CT #D303		1					
	MI FL 33174			82 Street Add	dress (P.O. Box Number is Not Accepta	ab l e)		
mev	MI 1 L 33174			83				
			and the state of t	64 City		FL	85 Zip	Code
Pursuant t	to the provisions of Sections 607 050	12 and 607 1508. Florida Stat	utes the et	ove-named cor	poration submits this statement for the	purpose of a	banging :	ts register
office or n	egistered agent or both, in the State	of Florida. Such change was	s authorizac	by the corpora	poration submits this statement for the ation's board of directors. I hereby acc	ept the appo	intment as	registered
,		ations of, Section 607.0505, I	riorida Stari	nes.	6.	41 00 6	191	7
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·	of harder that deprinted name of registered ag-	ent and title if applicable (No ID DIRECTORS	OTE Ragistered	Agent signature requ	ured when refirstating) ADDITIONS/CHANGES TO OFF		•	RS IN 12
	of harder that deprinted name of registered ag-				are man removaling,	ICERS AND	•	
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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 Black of chapter 607, con an attachment with an address.