

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000045697

1. Corporation Name

CCR Technology, Inc.

Principal Place of Business

Mailing Address

2320 S.W. 19th. Ter
Miami, FL 33145

2320 S.W. 19th. Ter
Miami, FL 33145

3. Date Incorporated or Qualified
6-13-95

3a. Date of Last Report

4. FEI Number
65-0595458

Applied For
Not Applicable

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

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Silvia Casero
2320 S.W. 19th. Ter
Miami, FL 33145

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 below of registered agent and date of appointment

DATE: Registered Agent Signature (typed or printed)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/T/D ☐ DELETE
NAME Guillermo Catalan
STREET ADDRESS 21 Calle 8-68, Zona 11
CITY-ST-ZIP Guatemala, Guatemala, C.A.

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S/D ☐ DELETE
NAME Maria E. Alvarado
STREET ADDRESS 21 Calle 8-69, Zona 11
CITY-ST-ZIP Guatemala, Guatemala, C.A.

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS ☐ DELETE
NAME Silvia Casero
STREET ADDRESS 2320 S.W. 19 Ter
CITY-ST-ZIP Miami, FL 33145

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

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

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

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

700001783757
-04/17/96--01045--009
***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-1996 (305) 856-5175
Daytime Phone #

SG 4-17-96

CR2E034 (12/95)