

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000050227 (4)**

1. Corporation Name  
**M.A.V. ENTERPRISES, INC.**



Principal Place of Business: **13553 SW 63 LANE MIAMI FL 33183**  
Mailing Address: **13553 SW 63 LANE MIAMI FL 33183**

3. Date Incorporated or Qualified: **06/27/1995**  
3a. Date of Last Report:   
4. FEI Number: **65-0591646**  
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  
21. **10831 SW 26 Street**  
22. Suite, Apt. #, etc.:   
23. City & State: **MIAMI-FL.**  
24. Zip: **33165** 25. Country: **DADE**  
26. Mailing Address: **10831 SW 26 Street**  
27. Suite, Apt. #, etc.:   
28. City & State: **MIAMI-FL.**  
29. Zip: **33165** 30. Country: **DADE**

9. Name and Address of Current Registered Agent  
**GONZALEZ, VIRGINIA  
13553 SW 63 LANE  
MIAMI FL 33183**

10. Name and Address of New Registered Agent  
81. Name:   
82. Street Address (P.O. Box Number is Not Acceptable): **10831 SW 26 Street**  
83.   
84. City: **MIAMI-** FL 85. Zip Code: **33165**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	GONZALEZ, VIRGINIA	
STREET ADDRESS	13553 SW 63 LANE	
CITY-ST-ZIP	MIAMI FL 33183	
TITLE	VSD	<input type="checkbox"/> DELETE
NAME	TEJEIRA, JAIME	
STREET ADDRESS	13553 SW 63 LANE	
CITY-ST-ZIP	MIAMI FL 33183	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
13. STREET ADDRESS	<b>10831 SW 26 St.</b>
14. CITY-ST-ZIP	<b>MIAMI-FL 33165</b>
2. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
23. STREET ADDRESS	<b>10831 SW 26 St</b>
24. CITY-ST-ZIP	<b>MIAMI-FL 33165</b>
3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. NAME	
33. STREET ADDRESS	
34. CITY-ST-ZIP	
4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. NAME	
43. STREET ADDRESS	
44. CITY-ST-ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. NAME	
53. STREET ADDRESS	
54. CITY-ST-ZIP	
6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
63. STREET ADDRESS	
64. CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, unchanged, or on an attachment with an address.

SIGNATURE: **X [Signature]** SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
04-24-96 305-220-0563  
DATE DAYTIME PHONE #

CR2E034 (12/95)