

FILE NOW: FILING LATE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 16 1997 8:00am
Secretary of State

DOCUMENT # P95000053256 (0)

1. Corporation Name:
ENRICK INDUSTRIES USA, INC.



Principal Place of Business

801 BRICKELL AVE
800
CORAL GABLES FL 33131
US

Mailing Address

1830 PONCE DE LEON BLVD.
CORAL GABLES FL 33134 4419

2. Principal Place of Business

21 1250 BAYHILL DR

Suite, Apt. #, etc

22 700

City & State

23 SAN BRUNO, CA

Zip

Country

24 94066-3049 26 US

26. Mailing Address

26 1250 BAYHILL DR

Suite, Apt. #, etc

27 700

City & State

28 SAN BRUNO, CA

Zip

Country

29 94066-3049 30 US

9. Name and Address of Current Registered Agent

SANCHEZ, WILLIAM J.
1830 PONCE DE LEON BLVD.
CORAL GABLES FL 33134

81 Name

SANCHEZ, WILLIAM J.

82 Street Address (P.O. Box Number is Not Acceptable)

10621 NORTH KENDALL DR

83 Suite

Suite 208

84 City

MIAMI

11

85

Zip Code

33176

3. Date Incorporated or Qualified

07/11/1995

36. Date of Last Report

04/17/1996

4. FIC Number

65-0598571

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. 193.032,
Florida Statutes

☐

Yes

☐

No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0702 and 607.1503, 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. Thereby accept the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Signature of person filing this report (if not the registered agent, attach)

(If filer is not the registered agent, attach signature of registered agent)

DATE

12. OFFICERS AND DIRECTORS

11 NAME PD
12 DE LAS PENAS, JOSE E
13 STREET ADDRESS 1828 PONCE DE LEON BLVD.
14 CITY-STATE CORAL GABLES FL 33134
15 TITLE VD
16 NAME ARROYO, BRENDA LENE
17 STREET ADDRESS 1828 PONCE DE LEON BLVD.
18 CITY-STATE CORAL GABLES FL 33134
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