

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Apr 18 1997 8:00am  
Secretary of State

DOCUMENT # P95000056292 (2)

1. Corporation Name  
MIAMIGATE, INC.



Principal Place of Business

8280 N.W. 27TH ST.  
SUITE 406  
MIAMI FL 33122

Mailing Address

8280 N.W. 27TH ST.  
SUITE 406  
MIAMI FL 33122-1903

2. Principal Place of Business

21 8306 MILLS DRIVE

22 SUITE # 690

23 MIAMI, FL

24 33183

25 USA

2a. Mailing Address

26 8306 MILLS DRIVE

27 SUITE # 690

28 MIAMI, FL

29 33183

30 USA

3. Date Incorporated or Qualified

07/20/1995

3a. Date of Last Report

02/08/1996

4. FEI Number

APPLIED FOR 65-0624152

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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

LORENZO, MANUEL P  
8280 N.W. 27TH ST.  
SUITE 406  
MIAMI FL 33122

10. Name and Address of New Registered Agent

81 Name

LORENZO, MANUEL P.

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

8620 S.W. 113 TERR.

83

84 City

MIAMI

FL

85 Zip Code

33156

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's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PD  
STREET ADDRESS LORENZO, MANUEL P  
CITY-ST-ZIP 8280 N.W. 27TH ST., #406  
MIAMI FL 33122

TITLE ☐ DELETE

NAME DTD  
STREET ADDRESS ESCUDER, JOSE L  
CITY-ST-ZIP 8280 N.W. 27TH ST., #406  
MIAMI FL 33122

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

8620 S.W. 113 TERR  
MIAMI, FL 33156

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

5125 N.W. 42nd AVENUE  
COCONUT CREEK, FL 33073

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

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 owner 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 in an attachment with an address.

SIGNATURE:

X

MANUEL P. LORENZO Apr 11/97 (305) 233-5525

CR2E034 (9/96)