

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 # **P95000064332**
1. Corporation Name
Fintelsys of Florida Corporation

700001836377
-05/23/96--01017--017
***233.75

Principal Place of Business
**1304 SW 160th Ave.
Suite 116
Ft. Lauderdale, FL 33326**

Mailing Address
same

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

3. Date Incorporated or Qualified
August 21, 1995
3a. Date of Last Report
N/A
4. FEI Number
65-0613806
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

9. Name and Address of Current Registered Agent

Carla Iyon Jimenez

10. Name and Address of New Registered Agent

81 Name
Carla Iyon Jimenez
82 Street Address (P.O. Box Number is Not Acceptable)
201 Racquet Club Road #N203
83
84 City
Ft. Lauderdale
85 Zip Code
FL 33326

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 signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	Carla Iyon Jimenez	201 Racquet Club Rd. #N203	Ft. Lauderdale, FL 33326	<input type="checkbox"/>
	President			
	Secretary			<input type="checkbox"/>
	Franklin Jimenez	165 Lakeview Dr. #201	Ft. Lauderdale, FL 33326	
	Treasurer			<input type="checkbox"/>
	Jaffray Rodriguez	165 Lakeview Dr. #201	Ft. Lauderdale, FL 33326	
	Director			<input type="checkbox"/>
	Marina S. Perez	165 Lakeview Dr. #201	Ft. Lauderdale, FL 33326	
	Director			<input type="checkbox"/>
	Sonia Perez-Rodriguez	165 Lakeview Dr. #201	Ft. Lauderdale, FL 33326	
	Director			<input checked="" type="checkbox"/>
	Camilo A. Perez	416 Lakeview Dr. #105	Ft. Lauderdale, FL 33326	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
	Director			<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Florancio Perez	416 Lakeview Dr. #105	Ft. Lauderdale, FL 33326		
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	Change	Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	Change	Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	Change	Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	Change	Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	Change	Addition

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 if changed, or on an attachment with an address.

SIGNATURE:

Sonia Perez Rodriguez - Sonia Perez Rodriguez 05/16/96 (305) 389-9650

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)