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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000065758 (1)

DOCUMENT #
1. Corporation Name

JOSE BANDIN, INC.

Principal Place of Business Mailing Address				· -	ill Bolil dalta bildi bilil indak bilol insi indi
836 WEST 3 HIALEAH FL	GRD STREET 33012	836 WEST 33RD ST HIALEAH FL 33012	TREET		
				3. Date Incorporated or Qualified 08/24/1995	3a. Date of Last Report
2. Principal Plac	ce of Business	2a. Mailing Address		4. FLI Number 65-0605-968	Applied For Not Applicable
Suite, Apt. #,	etc	Suite, Apt. #, etc.			\$8.75 Additional
2	. 000.	27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	ntangible tax under s 199.032,
<u>i</u>	25	29	30	Florida Statutes (1) Yes	
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New R	egistered Agent
DANIDIA	I IOCE				
BANDIN, JOSE 836 WEST 33RD STREET			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)	
	H FL 33012		83		
( (), (200)			<b>84</b> City		85 Zip Code
			1 1 1	ration submits this statement for the pur	FL
12. TITLE	gradient fyraud or prinded hains, of registered agent OFFICERS ANI D		13.	ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTORS IN 12  Change Addition
NAME	Bandin, Jose 836 West 33RD Street		1.2 NAME		
STREET ADDRESS O(TY-ST-ZIP	HIALEAH FL 33012		1.3 STREET ADDRESS 1.4 CHTY-ST-ZIP		
11115	111111111111111111111111111111111111111	☐ DELETE	2 1 TITLE		Change Addition
SAME .			2.2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
STY-SI-ZP		# Druck	2.4 CHY-ST ZIP		Change Addition
I-TLE		DELETE	3 1 TiTeF 3 2 NAME		C) change C year an
NAME STREET ADDRESS			3.3 STHEET ADDRESS		
111Y - S* - ZIP			3.4 CHTY+S1 - ZIF		
ITLE		[] DELETE	4 1 TITLE		Change Addition
TAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP		F*3 651 516	4 4 C TY - ST - ZIF		Change Addition
TLF .		[] DELFTE	5 'THLE 52 NAME		
VAME			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY - S1 7-P		
CITY-ST-ZIP TILE		DELETE	6 1 1illF		Change 🔲 Addit on
NAME			6.2 NAME		
STREET ADDRESS			6.3 STHEET ADDRESS		
CITY-ST-7IP			6.4 CiTY - ST - ZiP		and the second s
				for the exemption stated in Section 119 ate and that my signature shall have the its report as required by Chapter 607, Fi	

SIGNATURE:

SIGNATURE AND THE OF PRINT D NAME OF SIGNING OFFICER OR DIRECTOR

100 AT URE AND THE OF PRINT D NAME OF SIGNING OFFICER OR DIRECTOR