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CORPORATION ANNUAL REPORT



appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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

1996

DOCUMENT #

P95000079625 (6)

MICLA CHEMICALS, CORP. Principal Place of Business Mailing Address 2646 WEST 84TH STREET 2646 WEST 84TH STREET HIALEAH FL 33016 HIALEAH FL 33016 3. Date Incorporated or Qualified 3a. Date of Last Report 10/17/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0630143 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \Box Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees 23 28 8. This corporation has liability for intangible tax under s 199.032, Zip Country Zip Country Florida Statutes Yes No 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROTHLEIN, JAY ESQ. Street Address (P.O. Box Number is Not Acceptable) **B2** 930 WASHINGTON AVENUE 83 SECOND FLOOR, INTERCONTINENTAL BANK MIAMI BEACH FL 33139 City Zip Code 84 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. DATE SIGNATURE (NOTE: Rugistored Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable (12/95)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. T DELETE TITLE ZIGHELBOIM, JAIME CRZE034 1.2 NAME NAME 2646 WEST 84TH STREET 1.3 STREET ADDRESS STREE1 ADDRESS HIALEAH FL 33016 1.4 CITY - \$1 - 7IP CITY-ST-ZIP DELETE 2 1 TITLE ☐ Change Addition VSD THTLE ZIGHELBOIM, LIA 2.2 NAME NAME 2646 WEST 84TH STREET 23 STREET ADDRESS STREET ADDRESS HIALEAH FL 33016 2.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3. 1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST- 7IP CITY-ST-ZIP ☐ Change Addition DELETE 4. 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5 1 TIME TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE ☐ Change 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6 4 CITY - ST - ZIP DITY-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