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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 23 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000080587 (5)

INSUA & SON ENTERPRISES, INC.

Principal Place of Business Mailing Address 2421 NW 175 TERRACE 2421 NW, 175 TERRACE OPA LOCKA FL 33056 OPA LOCKA FL 33056-3611 3. Date Incorporated or Qualified 3a. Date of Last Report 10/20/1995 11/08/1996 Principal Place of Business 2a. Mailing Address 4. FEI Number **Applied** For SAME SAME 65-0622521 26 Not Applicable Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country $Z_{(0)}$ 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name insua, julio c 7401 WEST 32ND LANE 82 Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33018 83 City 85 Zip Code 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, just 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 farmfair with find accept the obligations of. Section 607.0505, Florida Statutes. Julio INSUA SIGNATURE NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Pres. Change Addition INSUA. FELIX ROBERTO INSUA NAME 1.2 NAME 2421 N.W. 175 TERRACE 2421 N.W 175 TEKRACE STREET ADDRESS 1.3 STREET ADDRESS PPA-LOCKA, 33056 VICE PRES. FCIX R. INSUA **OPA-LOCKA FL 33018** CITY ST. ZIP 1.4 CITY - ST - ZIP TITLE □ DELETE 21 TITLE Change Addition NAME 2.2 NAME 2421 H.W 175 TERACE STREET ADDRESS 2.3 STREET ADDRESS OPA-LOCKA FIA. 3305 CHT - ST- ZIP 2.4 CITY-ST-ZIP DELETE 31 TITLE SECRETARY Addition MARTA INSUA NAMÉ 3.2 NAME 2421 N.W 175 TERACE STREET ACORESS 3 3 STREET ADDRESS <u>LOCKA FIA. 33056</u> CHT+ST-7IP 34. CITY-ST-ZIP DELETE Change TITLE 41 TITLE ___ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS DITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS C:TY - ST - 7IP 5.4 CITY - ST- ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS. 6.3 STREET ADDRESS CITY - ST - ZIF 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 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 it granged, or on an attachment with an address.