SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Sep 08 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000084229 (0)

THE URBANA GROUP, INC.

Principal Place	Mailing Addr	Mailing Address					III ODIOI (BAIL OFILA		1 10 (1 10 1 1			
13360 SW 25 STREET MIAMI FL 33175				13380 SW 25 STREET MIAMI FL 33175				DO NOT WRITE IN THIS SPACE				
								3. Date Incorporated or Qualified	3a. Date of		port	
								10/30/1995	03/12/	1996		
2. Principal Place of Business			2a. Mailing Address			4. FEI Number			olied For			
21			26					NOT APPLICABLE			Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired		.75 A Fee Red	dditional			
City & State			City & Sta	City & State				E Clastian Commoion Financian			Мау Ве	
23			28				6. Election Campaign Financing Trust Fund Contribution		dded to			
Zip					Count	ry		8. This corporation owes or has pa	aid the current year Intangible			
24	25			29 30				Personal Property Tax due June 30. Yes No				
	g. Name and Add	ress of Curren	t Registered Age		10. Name and Address of New Registered Agent							
FONTICIELLA, ARMANDO J					8	1 Name						
13360 SW 25 STREET					6	82 Street Address (P.O. Box Number is Not Acceptable						
MIAMI FL 33175						3						
					ľ							
					€	4 City			FL 85	Zip C	ode	
11. Pursuant	to the provisions of Se	octions 607.0502	2 arıd 607.1508, FI	lorida Statute	s, the abo	ve-named	corpo	ration submits this statement for the	ournose of chan	ging its	registered	
office or r	egistered agent, or bo m fam iliar with, and a	oth, in the State	of Florida. Such of ations of, Section 6	hange was au 607.0505. Flor	uthorized ida Statul	by the cor es.	poratio	in's board of directors. I hereby acce	pt the appointm	ent as r	egistered	
SIGNATURE												
BIGHTHORE	Signature, typed or printed no			(NOTE	Registered A	gent signatur	e required	i when reinstating)	DATE			
12.	- NA	OFFICERS AND		l prietr	13.	, <i>,</i> , , , ,		ADDITIONS/CHANGES TO OFFI		·~~		
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STREET ADDRESS			· ·			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP						
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CITY-ST-ZIP					3 4. D(T)	-ST-ZIP						
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NAME					4. 2 NAM	Œ						
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CITY-ST-ZIP				DELETE.	4.4 CITY		ļ				1 1 1 1 1 1 1 1	
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NAME					5.2 NAM							
STREET ADDRESS						ET ADDRESS						
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		DELETE	5.4 CITY		 			hange	☐ Addition	
TITLE			L	I NELETE	6.1 TITL				_ ∪ ∿	nenAe	□ Vi0iii0ii	
NAME OXBETT ADDRESS					62 NAM							
STREET ADDRESS					6.3 STRE	ET ADDRESS	1					

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 of the corporation or the receiver or trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or manged, or on an attachment with an address.