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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000097863 (1)

1. Corporation Name

THE PUIG GROUP, INC.

FILED

97 JUL 14 PM 4:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 96A7

Principal Place of Business

Mailing Address

~~% GUNSTER YOAKLEY VALDES-FAULI & STEWART~~
~~2 SOUTH BISCAYNE BLVD., SUITE 3400~~
~~MIAMI FL 33131~~

~~% GUNSTER YOAKLEY VALDES-FAULI & STEWART~~
~~2 SOUTH BISCAYNE BLVD., SUITE 3400~~
~~MIAMI FL 33131~~

2. Principal Place of Business

21 205 N. Coconut Lane

Suite, Apt. #, etc.

22 City & State

23 Miami Beach, Florida

Zip

24 33139

Country

25 U.S.A.

2a. Mailing Address

26 205 N. Coconut Lane

Suite, Apt. #, etc.

27 City & State

28 Miami Beach, Florida

Zip

29 33139

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

GONZALEZ, ENRIQUE II
ONE BISCAYNE TOWER, SUITE 3400
2 SOUTH BISCAYNE BLVD.
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

Enrique Gonzalez, III

82 Street Address (P.O. Box Number is Not Acceptable)

241 Sevilla Avenue

83

Suite 802

84 City

Coral Gables

FL

85 Zip Code

33134

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 date if applicable.

Enrique Gonzalez, III

6/12/97

DATE

12. OFFICERS AND DIRECTORS

TITLE Director, President & Secretary ☐ DELETE

NAME Dora E. Puig

STREET ADDRESS 205 N. Coconut Lane

CITY-ST-ZIP Miami Beach, Florida 33139

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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****\$915.00 ****\$915.00

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)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/12/97

Date

(305) 285-1614

Daytime Phone #

CR2E034 (12/95)