

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

FILED

97 JUL 14 PM 4:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P95000097863 (1)

1. Corporation Name
THE PUIG GROUP, INC.

REINSTATEMENT 10-97

Principal Place of Business Mailing Address
**% GONSTER YOAKLEY VALDES-FAULI & STEWART
2 SOUTH BISCAYNE BLVD., SUITE 3400
MIAMI FL 33131**

3. Date Incorporated or Qualified **12/21/1995** 3a. Date of Last Report **N/A**

2. Principal Place of Business 2a. Mailing Address
21 **205 N. Coconut Lane** 26 **205 N. Coconut Lane**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 City & State 27 City & State
23 **Miami Beach, Florida** 28 **Miami Beach, Florida**
Zip Country Zip Country
24 **33139** 25 **U.S.A.** 29 **33139** 30 **U.S.A.**

4. FEI Number **65-0630236** Applied For Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 officer 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 *Enrique Gonzalez, III* **Enrique Gonzalez, III** 6/12/97
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE DELETE
NAME **Director, President + Secretary**
STREET ADDRESS **Dora E. Puig**
CITY-ST-ZIP **205 N. Coconut Lane**
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

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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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: *Dora E. Puig* 6/12/97 (305) 285-1616
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (12/95)