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Apr 14 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000053862 (4)

1. Corporation Name  
MADRIGAL INTERNATIONAL CORPORATION



Principal Place of Business  
4410 SW 102 CT.  
MIAMI FL 33165

Mailing Address  
4410 SW 102 CT.  
MIAMI FL 33165-5625

3. Date Incorporated or Qualified  
06/25/1996

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1433 SW 129 CT  
Suite, Apt. #, etc.

26 1433 SW 129 CT  
Suite, Apt. #, etc.

4. FEI Number  
65-0679121

Applied For  
Not Applicable

22 City & State

27 City & State

23 MIAMI - FL  
Zip

28 MIAMI FL  
Zip

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

24 33184 25 DADE

29 33184 30 DADE

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

TIMBIS, ANA M  
4410 SW 102 CT.  
MIAMI FL 33165

81 Name

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

83 1433 SW 129 CT

84 City

MIAMI

FL

85 Zip Code  
33184

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 *X* *Ana Maria Timbis* DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME DP  
STREET ADDRESS MADRIZ, JOSE J  
CITY-ST-ZIP 4410 SW 102 CT.  
MIAMI FL 33165

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 1433 SW 129 CT  
1.4 CITY-ST-ZIP MIAMI FL 33184

TITLE ☐ DELETE  
NAME DV  
STREET ADDRESS MADRIZ, ZOILA D  
CITY-ST-ZIP 4410 SW 102 CT.  
MIAMI FL 33165

2.1 TITLE ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 1433 SW 129 CT  
2.4 CITY-ST-ZIP MIAMI FL 33184

TITLE ☐ DELETE  
NAME DS  
STREET ADDRESS TIMBIS, ANA M  
CITY-ST-ZIP 4410 SW 102 CT.  
MIAMI FL 33165

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS 1433 SW 129 CT  
3.4 CITY-ST-ZIP MIAMI FL 33184

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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 if changed, or on an attachment with an address.

SIGNATURE: *JOSE J MADRIZ* 4-7-97 (305)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/96)