FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 OCT 19 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000057543

1. Corporation Name
DePons & Assoc. Inc

Principal Place of Business / Mailing Address
One Biscayne Tower - Ste 104
miami - FL. 33131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 One Biscayne Tower	26 One Biscayne Tower
22 Suite, Apt #, etc. 104	27 Suite, Apt #, etc. 104
23 City & State MIAMI - FL	28 City & State MIAMI - FL
24 Zip 33131 25 Country USA	29 Zip FL 33131 30 Country USA

3. Date Incorporated or Qualified: 1996

4. FEI Number: 65-0678555 ☐ 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 owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

John Mac Daniel, Esq.
One Biscayne Tower, Ste 2975
2 So. Biscayne Blvd
miami - FL. 33131

10. Name and Address of New Registered Agent

31 Name: Michael A Torres
32 Street Address (P.O. Box Number is Not Acceptable): 195 NW 96 St
33 MI
34 City: MIAMI FL 35 Zip Code: 33150

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, 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: Michael A Torres (signature) 10-13-99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President ☒ DELETE	1.1 TITLE	President ☒ Change ☐ Addition
NAME	Peggy BRUHY	1.2 NAME	Luz TORRES
STREET ADDRESS	373 NE 91 St.	1.3 STREET ADDRESS	8337 E. Dixie Hwy
CITY-ST-ZIP	miami - shores, FL. 33138	1.4 CITY-ST-ZIP	miami - FL. 33138
TITLE	Sec ☒ DELETE	2.1 TITLE	V.P. ☒ Change ☐ Addition
NAME	DePONS, Patricia	2.2 NAME	Peggy BRUHY
STREET ADDRESS	952 NE 90 St	2.3 STREET ADDRESS	373 NE. 91 St. Mia, FL. 33138
CITY-ST-ZIP	miami - FL. 33138	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	700003026877---8
STREET ADDRESS		3.3 STREET ADDRESS	-10/27/99--01089--002
CITY-ST-ZIP		3.4 CITY-ST-ZIP	****150.00 ****150.00
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	T8 ☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE: (signature) PATRICIA L. DePONS 10-12-99 305-372-8700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

OCT-12-99 TUE 4:22 PM MOYLE-ASSOCIATES-INC FAX NO. 3054303939 P. 2

DE PONS & ASSOCIATES INC.

ONE BISCAYNE TOWER
SUITE 104
MIAMI, FL. 33131

2

Miami, October 12, 1999

SECRETARY OF STATE
DIVISION OF CORPORATIONS

RE : ANNUAL REPORT
DOC # : P96000057543

Dear Sir or Madam,

Please find enclosed the annual report form and fee for our Corporations De Pons & Associaites Inc. for 1999. I am a French Citizen in the process of opening a gourmet food shop downtown Miami. Unfortunately, since I am not at all times at the location , I have not received my mail properly and to make matters worst, I was unaware of the requirements for the filing of the Report included. Would you kindly consider waiving the penalties and change the mailing address to the Registered Agent mentioned on the form so as to avoid any further delays in my communications with the Division. From this time forward, I will make sure to report timely every year.

I thank you in advance for your kind cooperation in this matter and remain,

Yours sincerely,

Peggy Bruhy
President

Encl. : 2 (annual report and check)