## 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



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000060696 (7)

## FILED Sep 18 1997 8:00am Secretary of State

BIANCA INTERNATIONAL CORPORATION								
Principal Plac	ce of Business	Mailing Address			<del></del>		ANN AANA CIRK IA	
2903 SALZEDO ST. 2903 SALZEDO ST.								
CORAL GABLES FL 33134 CORAL GABLES FL 33134								
						DO NOT WRITE IN THI		
						3. Date Incorporated or Qualified 3a. 07/19/1996	Date of Last R	eport
2. Principal	Principal Place of Business 2a. Mailing Address					4 FEI Number	AL C	oplied For
21 26						59 339 67		ot Applicable
Suite, Apt. #, etc.						5. Certificate of Status Desired	•	Additional
22	27	Chata			<u> </u>		equired	
City & Sta	<u>├</u>					6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	28 Country Zip Cou			ntry		Trust Fund Contribution   8. This corporation owes or has paid the contribution.		
24	25	29	30			Personal Property Tax due June 30.		No I
<del></del> -	9. Name and Address of Current Registered Agent					10. Name and Address of New Registere		
M.	ARRERO, JULIO C			81	Name			
2002 GALZEDO GT				82	Stroot Addre	ess (P.O. Box Number is Not Acceptable)		
C	ORAL GABLES FL 33134			-	Silbel Addit	ess (1.0. bbx Number is Not Acceptable)		
				83				
			}	B4	City		. 85 Zip	Code
					·	F		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida. Such change was authorized by agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes						oration submits this statement for the purpose	of changing if	ts registered
agent.	am familiar with, and accept the oblig	ations of, Section 607.0505, FI	orida Stat	utes.	ne corporati	on's board or directors. Prioreby accept the a	ppomimon as	registered
SIGNATURE		·						
- <del></del>	Signature, typed or printed name of registered ag	iont and title it applicable (NO) ND DIRECTORS		Agent	signature require	ad when reinslating)  DATE  ADDITIONS (2014) NOTE TO OFFICE PO A		30.01.40
12.	I DPT	DELETE	13. 1,110	T I F	Г	ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
NAME	RENGIFO, DONALDO						LLI ONLINGO	7,00,00
STREET ADDRESS	3947 62ND ST., N.		1.3 STREET ADDRESS		DDRESS			15
CITY-ST-ZIP	ST. PETERSBURG FL 33709			1Y-ST-	·			[3
TITLE	DVS			2.1 TITLE			Change	Addition
NAME	RENGIFO, JAYNE	RENGIFO, JAYNE		ME				
STREET ADDRESS	3947 62ND ST., N.		2.3 ST	REET A	DDRESS ]			
CITY-ST-ZIP	ST. PETERSBURG FL 33709		2.4 CITY-ST-ZIP		- ZIP	<u> </u>		-
TITLE	DELETE 3.1		3.1 111	ILE			Change	Addition
NAME	321		3.2 NA	ME	ļ			Į.
STREET ADDRESS			3 3 ST	REET AL	DDAESS			
CITY-ST-ZIP		T occess		11Y - ST	- ZIP			
TITLE		☐ DELETE	4.1 1/1				L Change	Addition
NAME			4. 2 N					1
STREET ADDRESS					DORESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CHY-		ZIP		Change	Addition
NAME		L. VIII II	5.1 TITLE 5.2 NAME				L_ Change	L. AUGIEURI
STREET ADDRESS					DORESS			
CITY-ST-ZIP			F	nce i Al TY-ST-				
TITLE			6.1 TII		411"		Change	Addition
NAME			6.2 NA		}			
STREET ADDRESS					DDRESS			
CITY-ST-ZIP				TY-ST-	i i			
	hy certify that the information supplies	nd with this filing does not quali				in Section 119 07(3)(i) Florida Statutes I furti	per certify that	tho

4. 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.