

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

FILED

Apr 23 1997 8:00am
Secretary of State

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| PROFIT CORPORATION ANNUAL REPORT 1997 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # P96000066387 (7)

1. Corporation Name
PENSTONE CORPORATION



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| Principal Place of Business 129 CHEROKEE STREET MIAMI SPRINGS FL 33168 | Mailing Address 129 CHEROKEE STREET MIAMI SPRINGS FL 33168-5128 |
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|---|-------------------------|
| 3. Date Incorporated or Qualified 08/07/1996 | 3a. Date of Last Report |
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| 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country | 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country | 4. FEI Number Applied For <input checked="" type="checkbox"/> Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
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| 9. Name and Address of Current Registered Agent ALEX E. CARLSON, P.A. 145 CURTISS PARKWAY MIAMI SPRINGS FL 33168 | 10. Name and Address of New Registered Agent 81 Name JOSE A. RODRIGUEZ 82 Street Address (P.O. Box Number is Not Acceptable) 129 CHEROKEE ST. 83 84 City MIAMI SPRINGS FL 85 Zip Code 33168 |
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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]* PREP. JOSE A. RODRIGUEZ 4-14-97
(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|------------------------|---|--|
| TITLE | PD | 1.1 TITLE | |
| NAME | RODRIGUEZ, JOSE A | 1.2 NAME | |
| STREET ADDRESS | 129 CHEROKEE STREET | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | MIAMI SPRINGS FL 33168 | 1.4 CITY-ST-ZIP | |
| TITLE | ST | 2.1 TITLE | |
| NAME | RODRIGUEZ, MARTA M | 2.2 NAME | |
| STREET ADDRESS | 129 CHEROKEE STREET | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | MIAMI SPRINGS FL 33168 | 2.4 CITY-ST-ZIP | |
| TITLE | | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 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 in an attachment with an address.

SIGNATURE *[Signature]* JOSE A. RODRIGUEZ 4-14-97

CR2E034 (9/96)