

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000074171 (5)

1. Corporation Name
ALVARDO SERVICE CENTER, INC.

Principal Place of Business

183 S. STATE ROAD 7
MARGATE FL 33068

Mailing Address

183 S. STATE ROAD 7
MARGATE FL 33068-5722

2. Principal Place of Business

21 193 S. State Road 7

Suite, Apt. #, etc.

22 City & State

23 MARGATE, FL

24 Zip

33068

Country

25 BROWARD

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27 City & State

28 MARGATE, FL

29 Zip

33068

Country

30 BROWARD

3. Date Incorporated or Qualified
09/03/1996

3a. Date of Last Report

N/A

4. FEI Number

65-0693284

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

ALVARDO, RODRIGO
183 S. STATE ROAD 7
MARGATE FL 33068

10. Name and Address of New Registered Agent

81 Name

RODRIGO ALVARADO

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

193 S. State Road 7

83

84 City

MARGATE, FL 33

FL

85 Zip Code

33068

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 Rodrigo Alvarado

Signature, typed or printed name of registered agent and fee if applicable

President

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME RODRIGO ALVARADO
STREET ADDRESS 193 S. STATE ROAD 7
CITY-ST-ZIP MARGATE, FL 33068

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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CITY-ST-ZIP

TITLE ☐ DELETE

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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 500002236465--2

1.3 STREET ADDRESS -07/11/97--01115--002

1.4 CITY-ST-ZIP ****165.00 ****165.00

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME 500002236465--2

2.3 STREET ADDRESS -07/11/97--01115--003

2.4 CITY-ST-ZIP *****8.75

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

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 Rodrigo Alvarado President

04-21-97 954-9691545

FILED

97 JUL -7 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E034 (9/96)