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

FILED
97 JUN 24 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000103991 (1)

1. Corporation Name
LA REPUBLICA ~~CHEVRON~~ FINA CORPORATION

Principal Place of Business	Mailing Address
~~11498 SW 57TH ST.~~ ~~MIAMI FL 33173~~	~~11498 SW 57TH ST.~~ ~~MIAMI FL 33173-1004~~

3. Date Incorporated or Qualified: 12/30/1996
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 8781 SW 72 ST	26 SAME
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 MIAMI FLA	City & State 28 FL
Zip 24 33173 Country 25 USA	Zip 29 Country 30

4. FEI Number: 65-0715013 ☐ 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

BARRERA, ENRIQUE A
11498 SW 57TH ST.
MIAMI FL 33173

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	BARRERA, ENRIQUE A		1.2 NAME	
STREET ADDRESS	11498 SW 57TH ST.		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33173		1.4 CITY-ST-ZIP	
TITLE	DST	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	BARRERA, NILDA		2.2 NAME	
STREET ADDRESS	11498 SW 57TH ST.		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33173		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
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	☐ 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	

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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: E. A. Barrera