

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 21868 (2)

1. Corporation Name
FINANPRO, FLORIDA, INC.

Principal Place of Business

Mailing Address

APARTADO 5624, SAN JOSE 1000
COSTA RICA, CENTRAL AMERICA

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. # etc

26 AS ABOVE
Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

9. Name and Address of Current Registered Agent

ROBERT G. SCHRADER
~~5200 BLUE LAGOON~~
SUITE 600
MIAMI, FL. 33126

3. Date Incorporated or Qualified

12/31/90

3a. Date of Last Report

04/09/95

4. FEI Number

521868 (2)

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. 199.03?
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name Robert G. Schrader

82 Street Address (P.O. Box Number is Not Acceptable)
200 E. Broward Blvd,

83 City

84 Ft. Lauderdale, FL

85 Zip Code
33301

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.

APRIL 1, 1996

SIGNATURE

Signed in presence of and in front of registered agent and in full accordance with the provisions of Section 607.0505, Florida Statutes.

Signed in presence of and in front of registered agent and in full accordance with the provisions of Section 607.0505, Florida Statutes.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
LUIS MONTECINOS
APT. 5624, SAN JOSE 1000
COSTA RICA

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
OLGA MONTECINOS
APT. 5624, SAN JOSE 1000
COSTA RICA

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
DAVID G. HOUSMAN
6824 LOS TRECHOS N.E.
ALBUQUERQUE, NM 87109

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
ROBERT G. SCHRADER
~~5200 BLUE LAGOON DR.~~
MIAMI, FL 33126

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
[DELETE]

TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
[DELETE]

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY, ST, ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

[Change] [Addition]
[Change] [Addition]

[Change] [Addition]
[Change] [Addition]

[Change] [Addition]
[Change] [Addition]

[Change] [Addition]
[Change] [Addition]

[Change] [Addition]
[Change] [Addition]

[Change] [Addition]
[Change] [Addition]

SIGNATURE: LUIS MONTECINOS, PRESIDENT

APRIL 1, 1996

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

CR2E034 (12/95)