

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

APPROVED  
AND  
FILED  
95 JUL 10 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # S25407**  
1. Corporation Name

**CARIDAD TORRES BAUZA, INC.**

Principal Place of Business Mailing Address

**3626 N.W. 7th Street  
Miami, Florida 33125**

**300001538873  
-07/10/95--01081--001  
\*\*\*9225.00 \*\*\*225.00**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 1/26/91	3a. Date of Last Report 12/12/94
4. FEI Number 65-0252304	Applied For 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 § 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 2601 S. Bayshore Dr. Suite, Apt. #, etc. 22 Suite 1600 City & State 23 Miami, Florida Zip 24 33133	2a. Mailing Address 26 2601 S. Bayshore Dr. Suite, Apt. #, etc. 27 Suite 1600 City & State 28 Miami, Florida Zip 29 33133 Country 25 U.S. Country 30 U.S.
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9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Milton E. Martinez 3626 N.W. 7th Street Miami, Florida 33125				81 Name	A Z Registered Agent Corporation		
				82 Street Address (P.O. Box Number is Not Acceptable)	2601 S. Bayshore Drive		
				83	Suite 1600		
				84 City	FL	85 Zip Code	33133

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 a resident of, the State of Florida.

SIGNATURE: Kurtis J. Wilson  
By: Kurtis J. Wilson, Secretary  
Signature of Registered Agent required when re-registering. DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D/P	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Martinez, Milton E.	1 2 NAME	
STREET ADDRESS	3626 N.W. 7th Street	1 3 STREET ADDRESS	
CITY - ST - ZIP	Miami, Florida 33125	1 4 CITY - ST - ZIP	
TITLE	D/V/T	2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Martinez, Milton E., Jr.	2 2 NAME	
STREET ADDRESS	3626 N.W. 7th Street	2 3 STREET ADDRESS	
CITY - ST - ZIP	Miami, Florida 33125	2 4 CITY - ST - ZIP	
TITLE		3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3 2 NAME	
STREET ADDRESS		3 3 STREET ADDRESS	
CITY - ST - ZIP		3 4 CITY - ST - ZIP	
TITLE		4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	
CITY - ST - ZIP		4 4 CITY - ST - ZIP	
TITLE		5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5 2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY - ST - ZIP		5 4 CITY - ST - ZIP	
TITLE		6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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.

SIGNATURE: [Signature] Milton Martinez Jr (30) 4446422  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE