

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S28319 (9)

1. Corporation Name

DORIS AMAYA AND ASSOCIATES, P.A.



Principal Place of Business

Mailing Address

2100 CORAL WAY
SUITE 206
MIAMI FL 33145
US

2100 CORAL WAY
SUITE 206
MIAMI FL 33145
US

2. Principal Place of Business

815 N.W. 57th Ave, Suite 449

2a. Mailing Address

815 N.W. 57th Ave, Suite 449

Suite, Apt. #, etc

Suite, Apt. #, etc

Miami, Florida 33126

Miami, Florida

City & State

City & State

33126

33126

Zip

Country

USA

Zip

Country

USA

9. Name and Address of Current Registered Agent

AMAYA, JORGE M.
150 OCEAN LANE DR., APT 1A
ISLAND BREAKERS CONDOMINIUM
KEY BISCAYNE FL 33149

same agent
new address

3. Date Incorporated or Qualified
01/30/1991

3a. Date of Last Report
05/01/1995

4. FEI Number
65-0261587

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. 190.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name Amaya, Jorge M.

82 Street Address (P.O. Box Numbers Not Acceptable)
9591 Fontainebleau Blvd, 2-622

83 Miami,

84 City

FL 85 Zip Code
33172

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 required for principal place of business and mailing address

(NOTE: Registered Agent signature required when removing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

AMAYA, DORIS
150 OCEAN LANE DR., APT 1A
KEY BISCAYNE FL

change in
address

TITLE

D

AMAYA, JORGE M.
150 OCEAN LANE DR., APT 1A
KEY BISCAYNE FL

change in
address

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

Amaya, Doris President

1.2 NAME

9591 Fontainebleau Blvd, 2-622

1.3 STREET ADDRESS

Miami, Florida 33172

1.4 CITY - ST - ZIP

Miami, Florida 33172

2.1 TITLE

Jorge M. Amaya Vice President & Sec.

2.2 NAME

9591 Fontainebleau Blvd 2-622

2.3 STREET ADDRESS

Miami, Florida 33172

2.4 CITY - ST - ZIP

Miami, Florida 33172

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jorge Amaya

Jorge Amaya

8/4/96

305-225-6213

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0081072 CP

CR2E034 (3/96)