

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Tallahassee, Florida
32399-0001

**APPROVED
AND
FILED**

95 MAY -1 AM 8:22

DOCUMENT # **S47913**

(6)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. BARZOLA CANDLES DIST., INC.

DO NOT WRITE IN THIS SPACE

2. Principal Office Address		2a. Mailing Address		3. Certificate Number		3a. Date of Last Report	
410 N.W. 72ND AVE MIAMI FL 33126		410 N.W. 72ND AVE. MIAMI FL 33126		04/25/1991		05/01/1994	
21. State		26. State		4. Filing Number		Applied Fee	
22. City & State		27. City & State		65-0334934		Not Applicable	
23. Zip		28. Zip		5. Certificate of Status Desired		☒ \$8.75 Additional Fee Required	
24. Zip		29. Zip		6. Election Campaign Contribution		☐ \$5.00 May Be Added to Fees	
25. Zip		30. Zip		7. This corporation has liability for intangible tax under S. 190 (FS)		☒ Yes ☐ No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
BARZOLA, MAURICIO R. 410 N.W. 72ND AVE. MIAMI FL 33126		81. Name	
		82. Street Address (If Box Number is Not Applicable)	
		83. City & State	
		84. Zip	
		FL 85. State	

11. I, the undersigned, certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that the information furnished in this report is true and correct to the best of my knowledge and belief, and that the information furnished in this report is true and correct to the best of my knowledge and belief.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONAL NAMES TO BE LISTED AND THEIR ADDRESSES	
NAME	P. BARZOLA, MAURICIO R. 410 NW 73ND AVE MIAMI FL	1. NAME	
STREET ADDRESS		2. STREET ADDRESS	
CITY & STATE		3. CITY & STATE	
NAME	VPS. BARZOLA, MARTHA L. 410 NW 73ND AVE MIAMI FL	4. NAME	
STREET ADDRESS		5. STREET ADDRESS	
CITY & STATE		6. CITY & STATE	
NAME		7. NAME	
STREET ADDRESS		8. STREET ADDRESS	
CITY & STATE		9. CITY & STATE	
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY & STATE		12. CITY & STATE	
NAME		13. NAME	
STREET ADDRESS		14. STREET ADDRESS	
CITY & STATE		15. CITY & STATE	

14. I, the undersigned, certify that the information furnished in this report is true and correct to the best of my knowledge and belief, and that the information furnished in this report is true and correct to the best of my knowledge and belief, and that the information furnished in this report is true and correct to the best of my knowledge and belief.

SIGNATURE:

Mauricio R. Barzola

Mauricio R. Barzola, President

4/21/95

305-261-1322