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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

101

<ol> <li>Corporation</li> </ol>	MENT# 33072 Name APPLIANCES, CORP.	**	(2)			
Principal Place of Business 1280 NORTHWEST 119TH STREET MIAMI FL 33167 /320.ww 11957		Mailing Address 1280 NORTHWEST 119TH STREET MIAMI FL 33167 1320 WW 11537			* 1000/2010 101 811/1 941/1 1001/ 9751/ 104/ 916/1 919/1 819/1 918/1 918/1 418/1 418/1 418/1	
					3 Date lacounceated or Qualified 3. Date of Last Report	
M104) F/33167		Mion 7/ 33167			3. Date Incorporated or Qualified 05/03/1991	3a. Date of Last Report 02/21/1995
2. Principal Place of Business		2a. Maing Address		4. FET Number 65-0278719	Applied For	
21   Suite, Apt. #, etc.		Suite. Apt. #, etc.		00 02/0/10	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Orty & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
Zip Country		Zip Country		Trust Fund Contribution	Added to Fees	
24	25	29]	30	try	8. This corporation has fiability for Florida Statutes Yes	intangible tax under s. 199.032, :- □ No
	9. Name and Address of Curr	ent Registered Agen			10. Name and Address of New F	
DAMIDET	, JULIO A.		1	Name		
	rthwest 119th Street		1	32 Street Addr	ress (P.O. Box Number is Not Acceptat	ole)
MIAMI FL			1	33		
			  -	34 Orty		
					ration submits this statement for the pu	FL 85 Zip Code
12. TIDLE NAME STREET ADDRESS COVY-SY-7/P	P OFFICERS A RAMIREZ, MARIELA 12200 NW 20 CT MIAMI FL	NO DIRECTORS	13. TETE 1 1 TITT 1 2 NAM 1 3 STR 1 4 CTN	FE ADDRESS -ST-ZIP	ADDITIONS/CHANGES TO OFF	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS C TY - ST - ZiP		□ 0E	2.2 NAM 2.3 STRI	- 1		☐ Change ☐ Addition
THE NAME STREET ADDRESS CHY-ST-ZIP		□ DE	32 NAM 33 STH			Change Addition
TITLE NAME STHEET ADDRESS CITY-ST_ZIP		<u> </u>	4.2 NAM 4.3 STRI	İ		Change Addition
THE NAME STREET AUDRESS CITY+ST-ZIP		08	LETE 5 1 THE 52 NAM 53 STRI	E		☐ Change ☐ Addition
TITLE NAME STHEET ADDRESS CMY-ST-ZIP		DE	52 NAM 63 STRI 64 CITY	E EFF ADDRESS - S1 - Z12		☐ Change ☐ Addit on
certify that oath; that I	the information indicated on this arr am an officer or director of the corp Brook 12 or Block 13 if changed, o	nnua report or supplien poration or the receiver or an attachment will	iental annua' report is : or trustee empowere	true and accura d to execute thi	or the exemption stated in Section 119, the and that my signature shall have the signature shall have the signature shall have the signature shall have the signature foot. Fire the same shall be supported by Chapter 607, Fire the same shall be supported by Chapter 607, Fire the same shall be supported by Chapter 607, Fire the same shall be supported by the same shall be	same lend offect as if made under

(MILLA) TO MILLAND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)