

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 # V00936

(7)

1. Corporation Name

GRAND SLAM MARKETING, INC.



Principal Place of Business

Mailing Address

7205 SW 109 TERRACE
MIAMI FL 33156

7205 SW 109 TERRACE
MIAMI FL 33156

3. Date Incorporated or Qualified

12/18/1991

3a. Date of Last Report

01/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ORTEGA, JOSE A
2100 NW 92ND AVE
MIAMI FL 33172

81 Name

JUAN C. Iglesias

82 Street Address (P.O. Box Number is Not Acceptable)

83

7205 S.W. 109 Terr

84

MIAMI

FL

85

Zip Code

33156

11. Pursuant to the provisions of Sections 607.0702 and 607.1505, 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 607.0702, Florida Statutes.

SIGNATURE

(Signature of person named in Block 9 and Block 10)

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

P

IGLESIAS, JUAN C.
7205 SW 109 TERR
MIAMI FL 33156

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

V

IGLESIAS, JUAN C
7205 SW 109 TERR
MIAMI FL

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

2 1 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

3 1 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

4 1 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

5 1 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

6 1 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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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.

1-25-96 305-599-8928

Date

Daytime Phone #

CR2E034 (12/95)