

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Jan 25 1996 8:00 am
Secretary of State

DOCUMENT # V11774 (9)

1. Corporation Name
NUNEZ FINANCE COMPANY



Principal Place of Business: 12515 KENDALL DRIVE
SUITE 300
MIAMI FL 33186
Mailing Address: 12515 KENDALL DRIVE
SUITE 300
MIAMI FL 33186

3. Date Incorporated or Qualified 02/05/1992
3a. Date of Last Report 02/28/1995
4. FEI Number 65-0313961
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. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business 21 Suite, Apt. #, etc.
22 City & State
23 Zip Country
24 25 26 27 28 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NUNEZ, ALEXANDER
14715 SW 46 LANE
MIAMI FL 33185
Delete

81 Name RAFAEL NUNEZ
82 Street Address (P.O. Box Number is Not Acceptable) 12642 SW 78th St.
83
84 City MIAMI FL 85 Zip Code 33183

11. Pursuant to the provisions of Sections 607.0602 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 607.0905, Florida Statutes.

SIGNATURE: *Rafael Nunez*
Signature of person or persons authorized to register agent and bind it acceptable

RAFAEL NUNEZ

1-17-96

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE ☒ DELETE
NAME NUNEZ, ALEXANDER
STREET ADDRESS 14715 SW 46 LANE
CITY-STATE-ZIP MIAMI FL
2. TITLE ☒ DELETE
NAME NUNEZ, MARYSOL
STREET ADDRESS 14715 SW 46 LANE
CITY-STATE-ZIP MIAMI FL
3. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
4. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
5. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
6. TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Pres. ☒ Change ☐ Addition
1.2 NAME RAFAEL NUNEZ
1.3 STREET ADDRESS 12642 SW 78th St
1.4 CITY-STATE-ZIP MIAMI FL 33183
2.1 TITLE Secretary ☒ Change ☐ Addition
2.2 NAME Michele Nunez
2.3 STREET ADDRESS 12642 SW 78th St
2.4 CITY-STATE-ZIP MIAMI FL 33183
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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, as changed, or on an attachment with an address.

SIGNATURE: *Rafael Nunez* President

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-96 305-5967456

Date

Daytime Phone #

CR2E034 (12/95)