
(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

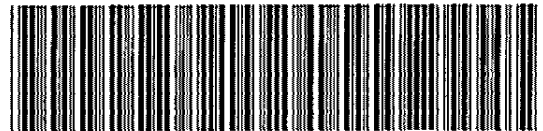
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400037613644

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED 1-4-1995
F05403495-0113 12-0017

DOCUMENT # V12346

1. Corporation Name

MYSOLO CORP.

Principal Place of Business
3034 SW 100 COURT
MIAMI, FL 33165

Mailing Address
3034 SW 100 COURT
MIAMI, FL 33165

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/07/1992
3a. Date of Last Report

4. FEI Number 65-0321027
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 never, for intangible tax under S. 191.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip Country

24. Zip Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip Country

29. Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVD.
1600 MIAMI CENTER
MIAMI, FL 33131

81. Name
82. Street Address (P.O. Box Number is Not Applicable)
83.
84. City FL 85. Zip Code

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, print or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when changing agent)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE D
2. NAME SOTO, LORENZO
3. STREET ADDRESS 3034 SW 100 COURT
4. CITY, ST. ZIP MIAMI, FL 33165

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY, ST. ZIP

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY, ST. ZIP

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY, ST. ZIP

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY, ST. ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY, ST. ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE ☐ Change ☐ Add
2. 2. NAME
3. 3. STREET ADDRESS
4. 4. CITY, ST. ZIP

5. 5. TITLE ☐ Change ☐ Add
6. 6. NAME
7. 7. STREET ADDRESS
8. 8. CITY, ST. ZIP

9. 9. TITLE ☐ Change ☐ Add
10. 10. NAME
11. 11. STREET ADDRESS
12. 12. CITY, ST. ZIP

13. 13. TITLE ☐ Change ☐ Add
14. 14. NAME
15. 15. STREET ADDRESS
16. 16. CITY, ST. ZIP

17. 17. TITLE ☐ Change ☐ Add
18. 18. NAME
19. 19. STREET ADDRESS
20. 20. CITY, ST. ZIP

21. 21. TITLE ☐ Change ☐ Add
22. 22. NAME
23. 23. STREET ADDRESS
24. 24. CITY, ST. ZIP

14. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information furnished 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LORENZO SOTO

4/24/95

Date

Signature