

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # V31291 (0)

1. Corporation Name

SANCHEZ INVESTMENT CORPORATION



Principal Place of Business

Mailing Address

65 W. 50 STREET  
HIALEAH FL 33012

1820 W. 53RD STREET  
SUITE 508  
HIALEAH FL 33012  
US

3. Date Incorporated or Qualified  
04/24/1992

3a. Date of Last Report  
01/20/1995

2. Principal Place of Business

2a. Mailing Address

21 1820 W. 53rd Street

26 7270 West 15 Avenue

4. FEI Number  
65-0327461

Applied For  
Not Applicable

Suite, Apt. #, etc

Suite, Apt. #, etc

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

22 Suite 508

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

City & State

City & State

23 Hialeah, FL

28 Hialeah, FL

8. This corporation has liability for intangible tax under s. 199.032  
Florida Statutes ☒ Yes ☐ No

Zip

Country

Zip

Country

24 33012

25

29 33014

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SANCHEZ, ELIO J.  
1820 W 53 STR  
STE 508  
HIALEAH FL 33012

81 Name

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

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

*Elio Sanchez*

Signature typed or printed name of registered agent and brief of approval

(Initials) Registered Agent's signature required after reinstatement

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME SANCHEZ, ELIO J.  
STREET ADDRESS 1820 W 53 STR #508  
CITY-ST-ZIP HIALEAH FL ☐ DELETE

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

TITLE ST  
NAME BATISTA, EDUARDO C  
STREET ADDRESS 1820 W 53 STR #508  
CITY-ST-ZIP HIALEAH FL ☐ DELETE

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP

7270 WEST 15 AVENUE  
HIALEAH, FL. 33014 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

MERCEDES SANCHEZ V/D  
1820 W 53RD STREET STE 508  
HIALEAH, FL. 33012 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Elio Sanchez*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)