

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

DOCUMENT # **V45026** (4)

1. Corporation Name

**CAMESCO INVESTMENTS, INC.**



Principal Place of Business

**848 BRICKELL AVE.  
STE. 950  
MIAMI FL 33131**

Mailing Address

**848 BRICKELL AVE.  
STE. 950  
MIAMI FL 33131**

3. Date Incorporated or Qualified

**06/22/1992**

3a. Date of Last Report

**11/16/1995**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

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City & State

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Zip

Country

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4. FET Number

**65-0515363**

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

9. Name and Address of Current Registered Agent

**DESENS, RALPH MR.  
848 BRICKELL AVE.  
STE. 950  
MIAMI FL 33131**

81. Name

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

83

84. City

**FL**

85. Zip Code

10. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

**PVST  
CAMERO, OMAR  
848 BRICKELL AVE., STE. 950  
MIAMI FL 33131**

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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SIGNATURE: **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/26/96**

Daytime Phone #

CR2E034 (12/95)