

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 JUN 22 PM 4:08

DOCUMENT # V63295

1. Corporation Name

AMEX ENTERPRISES, CORP.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100001522361

-06/23/95--01086--006

***225.00 ***225.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

3364 SW 25TH TERRACE
MIAMI FL 33134

P.O. BOX 142116
CORAL GABLES FL 33114
US

3. Date Incorporated or Qualified

09/09/1992

3a. Date of Last Report

06/10/1993

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-5201763

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARQUEZ, ARMANDO F
MARQUEZ, MERCEDES
350 SW 48TH COURT
MIAMI FL 33144

81 Name

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

301 NW 57AVE SUITE 203

83

84 City

MIAMI

FL

85 Zip Code
35126

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 of the registered agent or the person designated as registered agent

(NOTE: Registered Agent signature required when consulting)

DATE

6.12.95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	MARQUEZ, ARMANDO F
STREET ADDRESS	350 SW 48TH COURT
CITY - ST - ZIP	MIAMI FL
TITLE	D
NAME	MARQUEZ, MERCEDES
STREET ADDRESS	350 SW 48TH COURT
CITY - ST - ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	301 NW 57AVE SUITE 203
1.4 CITY - ST - ZIP	MIAMI FL 33126
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	301 NW 57 AVE SUITE 203
2.4 CITY - ST - ZIP	MIAMI FL 33126
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 included 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 of this report or on an attachment with an address.

SIGNATURE:

(PRINT NAME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

Pres.

6.12.95.

261.7958.