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CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # V67909

(4)

1. Corporation Name

RANBEGI, CORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 24 PM 2:56

Principal Place of Business

3433 GARDEN AVENUE
MIAMI BEACH FL 33140

Mailing Address

C/O JORGE H. RAMOS
2250 SW 3RD AVE 5TH FLR
MIAMI FL 33129
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/01/1992

3a. Date of Last Report

04/13/1994

2. Principal Place of Business

2a. Mailing Address

P.O. Box 669

4. FEI Number

65-0364226

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

10. Name and Address of New Registered Agent

RAMOS, JORGE H., P.A.
2250 S.W. 3RD AVE.
THIRD FLOOR
MIAMI FL 33129

81

Name

X

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

83

City

84

State

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME JURADO, JUAN A.
STREET ADDRESS GENERAL VALERO 375 #108
CITY-ST-ZIP FAJARDO PU

TITLE SD
NAME JURADO, RAQUEL BRITO
STREET ADDRESS GENERAL VALERO 375 #108
CITY-ST-ZIP FAJARDO PU

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 JUAN A. JURADO ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS P.O. Box 669
1.4 CITY-ST-ZIP FAJARDO, P.R. 00738-0669

2.1 TITLE RAQUEL BRITO JURADO ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS P.O. Box 669
2.4 CITY-ST-ZIP FAJARDO, P.R. 00738-0669

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 supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 this corporation or the receiver or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/95 (305) 444-9632