

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -8 AM 9: 03

DOCUMENT # V72407 (2)

1. Corporation Name

ENRIQUILLO EXPORT & IMPORT INC.

Principal Place of Business

609 WOODGATE CIRCLE
SUNRISE FL 33326

Mailing Address

609 WOODGATE CIRCLE
SUNRISE FL 33326

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/20/1992

3a. Date of Last Report

01/31/1994

2. Principal Place of Business

21 55 WESTON RD.

2a. Mailing Address

26 55 WESTON RD.

4. FEI Number

65-0365073

Applied For

Not Applicable

Suite, Apt. #, etc.

22 SUITE 314

Suite, Apt. #, etc.

27 SUITE 314

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

23 FT. LAUDERDALE, FL

City & State

28 FT. LAUDERDALE, FL

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

24 33326

Country

Zip

29 33326

Country

30

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

9. Name and Address of Current Registered Agent

VARGAS, RAFAEL O.
609 WOODGATE CIRCLE
SUNRISE FL 33326

10. Name and Address of New Registered Agent

01 Name

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

03

04 City

FL

05 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 of person or persons named as registered agent and the date of signature

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

VARGAS, RAFAEL O.

STREET ADDRESS

608 WOODGATE CIRCLE

CITY-ST-ZIP

SUNRISE FL

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

15710 WOODGATE PLACE

1.4 CITY-ST-ZIP

SUNRISE, FL 33326

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

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 119.07(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 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305) 384-7675