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Mar 09, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 455803

BUENOS AIRES INVESTMENTS CO., INC.

Principal Place of Business Mailing Address				_		VIEW \$1211 21211	
C/O RAUL J. VALDES-FAULI C/O RAUL J. VALDES-FA							
3400 ONE BISCAYNE TOWER. 2 S BISC. BLVD. MIAMI FL. 33131 3400 ONE BISCAYNE TOWER. MIAMI FL. 33131			. 2 S BISC. BLVD.		DO NOT WRITE IN TH	S SPACE	
MIAMI PL. 33131 MIAMI PL. 33131					3. Date Incorporated or Qualifed		
					07/19/1975		
Principal Place of Business 2a. Mailing Address					4. FEI Number	A	pplied For
26				·	59-1814407		ot Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired		Additional lequired
27					 		
City & State City & State		⊢			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
23	Country	Zip	Country		8. This corporation owes the current year		
24	25 29 30		ֹה (Personal Property Tax.	⊠ Yes	□No _
9. Name and Address of Current Registered Agent					10. Name and Address of New Registere	d Agent	
			81	Name			
VALDES-FAULI CORP SVCS INC			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
ONE BISCAYNE TWR STE 3400 2 SO BISCAYNE BLVD					-		
MIAMI FL. 33131			83				
MIPMITE, 30101			84	City	F	85 Zip	Code
A CONTROL OF THE CONT				named com	oration submits this statement for the ournose	of changing its	s registered
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.							
agent. I ar	n familiar with, and accept the obligati	ons of, Section 607.0505, Florida	Statutes	·.			l
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NOTE: Re-	gistered Age	nt signature require	d when reinstating) DATE		
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	GUTIERREZ, GUSTAVO		1.2 NAME				1
STREET ADDRESS			1.3 STREE	TADDRESS			
CITY-ST-ZIP			1.4 CITY-S	T-ZIP		[☐ Change	Addition
TITLE	_		2,1 TITLE			LI Criange	
NAME			2.2 NAME				1
STREET ADDRESS	100			T ADDRESS			ł
CITY-ST-ZIP			2. 4 CITY-1	51-ZIP		☐ Change	Addition
NAME	DEMEJIA, ROSARIO G		3.2 NAME				_
STREET ADDRESS	2 S BISCAYNE BLVD. #3400			TADORESS			
CITY-ST-ZIP	MIAMI FL			ST-ZIP			
TITLE	DV	DELETE 4.17				Change	☐ Addition
NAME	DE GUTIERREZ, EMMA JARAMI	LLO	4. 2 NAME				
STREET ADDRESS	2 S BISCAYNE BLVD. #3400		4.3 STREE	TADDRESS			ļ
CITY-ST-ZIP	MIAMI FL		4.4 C/TY-S	ST-ZIP			
TITLE	AS	☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME	Valdes-fauli, raul e.		5.2 NAME		•		ļ

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

2 S BISCAYNE BLVD. #3400

MIAMI FL

Raul E. Valdes-Fauli

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

January 11, 1999

(305<u>)</u> 3766097

☐ Addition

☐ Change