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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT #

M81186

(2)

DUNCAN & FAY CORP.

FILED Jan 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address C/O FERNANDO RODRIGUEZ-VILA C/O FERNANDO RODRIGUEZ-VILA 2975 NW 77 AVE 2975 NW 77 AVE DO NOT WRITE IN THIS SPACE MIAMI FL 33122 MIAMI FL 33122 3. Date incorporated or Qualified 05/17/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0053255 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country 8. This corporation owes or has paid the current year Intangible Yes Yes ΠNο 29 30 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RODRIGUEZ-VILA, FERNANDO 2975 NW 77 AVE 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33122 84 City 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 reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE RODRIGUEZ-VILA, FERNANDO NAME 1.2 NAME 685 HARBOR LANE STREET ADDRESS 1.3 STREET ADDRESS KEY BISCAYNE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE SUGRANES, ROSA NAME 2.2 NAME 685 HARBOR LANE STREET ADDRESS 2.3 STREET ADDRESS KEY BISCAYNE FL CITY-S1-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY - ST- ZIP CITY - ST - ZIP Change ___ Addition DELETE TITLE 4.1 TITLE

6.4 CITY-ST-ZIP

14. I hereby certify the the information shapplied with this filling 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 senual 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 of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changes or on an attachment with an address.

4. 2 NAME 4.3 STREET ADDRESS

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

□ DELETE

4.4 CITY - ST - ZIP

5.4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS CITY - ST - ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TURFFETATANDO Butinguez-Vila 1-14-98

305-591-3880

☐ Change

Change

Addition

Addition