## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

May 12 1998 8:00am Secretary of State

1. Corporatio	in Name		0000720	000 (0)						
Principal Place of Business Mailing Address								- I ARROHODO SION HONIND BAINE MURHIN UNINE MUNICE DENELS DE		101 108 1001
501 BRICKELL KEY DRIVE 501 BRICKELL KEY DRIVE										
#602								DO NOT INDITE IN THE	0.004.05	,
MIAMI FL 33131 MIAMI FL 33131							DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified			
								1 .		
2. Principal Place of Business 2s. Mailing Address								05/16/1996 4. FEI Number		pplied For
21			<b>⊢</b>	26				65-0673673		ot Applicable
Suite, Apt. #, etc Suite, Apt					c.					Additional
22					6. Certificate of Status Desired		equired			
22         27           City & State         City & State								6. Election Campaign Financing	\$5.00	May Be
23			28	28				Trust Fund Contribution Added to Fees		
Zip	Country		Zip	Zip		Country		8. This corporation owes or has paid the current year Intangible		
24	25   29   30 9. Name and Address of Current Registered Agent			30	Personal Property Tax due June 30. Yes No			□ No		
				Agent		AT		10. Name and Address of New Registered	1 Agent	
VESTEC INTERNATIONAL CORPORATION						1 Name				
501 BRICKELL KEY DRIVE					8	2 Street	Addre	Address (P.O. Box Number is Not Acceptable)		
SUITE 602										
MU	VMI FL 331	31			[8:	3				
					8	4 City			<b>85</b> Zip	Code
								<u> </u>	L	
office or r agent. I a SIGNATURE			e State of Florida. So obligations of, Sec ered agent and title if appli					oration submits this statement for the purpose on's board of directors. I hereby accept the ap	pointment as	registered
12.		OFFICER	RS AND DIFFECTOR		13.		<del>,</del>	ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	P			DELETE	1.1 TITLE		P/			<b>₹</b> Addition
RAME		LART, RAFAEL	A	1.2 N			Adail Capiberibe de Souza Rosa			
STREET ADDRESS		CKELL KEY DR	SUITE 602	602			50	1 Brickell Key Drive	≥ <b>,</b> #·6(	02
CITY-ST-ZIP	MIAMI F	L 33131			1.4 CITY-			ami, Florida 33131	100	
TITLE				DELETE	2 1 TITLE		D		XX Change	☐ Addition
NAME					2.2 NAME			ıfael Diaz-Balart		
STREET ADDRESS						T ADDRESS	50	1 Brickell Key Drive	·, # 60	02
CITY-ST-ZIP TITLE				DELETE	2. 4 CITY		Mi	ami, Florida 33131	1 0	4.439
				□ NCCC1C	3.1 TITLE				Change	☐ Addition
NAME expect apported					3.2 NAME					
STREET ADDRESS						T ADDRESS				
CITY-ST-ZIP TITLE				DELETE	3.4. CITY		-		Change	Addition
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STREET ADDRESS						T ADDRESS	1			
CITY-ST-ZIP										
TITLE				DELETE	4.4 CITY- 5.1 TITLE		<del> </del>		Change	Addition
NAME					5.2 NAME					
STREET ADDRESS						T ADDRESS				
CITY-ST-ZIP					5.4 CITY -					
THLE				DELETE	6.1 TITLE		$\vdash$		Change	Addition
NAME					6.2 NAME					
STREET ADDRESS						T ADDRESS				
CITY CT. 7ID						er au				

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 of 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 chapted, or fine an attachment with an address.

Rafael Diaz-Balart / Director 305, 358, 8900