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FILED

Jan 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000011266 (8)

1. Corporation Name
CENTURY MANAGEMENT GROUP, INC.

Principal Place of Business
901 S.W. 69TH AVENUE
MIAMI FL 33144

Mailing Address
901 S.W. 69TH AVENUE
MIAMI FL 33144



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/04/1997

4. FEI Number

05-0720675

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MIAMI CORPORATE SYSTEMS, INC.
5200 BLUE LAGOON DRIVE
SUITE 700
MIAMI FL 33126

81 Name

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

83

84 City

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PINO, SERGIO
STREET ADDRESS 901 S.W. 69TH AVENUE
CITY-ST-ZIP MIAMI FL 33144

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME Director
1.3 STREET ADDRESS Humberto Lorenzo
901 SW 69 Ave.
1.4 CITY-ST-ZIP Miami FL 33144

TITLE ☐ DELETE

NAME BUSTAMANTE, GABRIEL M
STREET ADDRESS 901 S.W. 69TH AVENUE
CITY-ST-ZIP MIAMI FL 33144

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME Director
2.3 STREET ADDRESS Armando Guerra
901 SW 69 Ave.
2.4 CITY-ST-ZIP Miami FL 33144

TITLE ☐ DELETE

NAME GARCIA, CARLOS
STREET ADDRESS 901 S.W. 69TH AVENUE
CITY-ST-ZIP MIAMI FL 33144

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME IGLESIAS, ROLANDO
STREET ADDRESS 901 S.W. 69TH AVENUE
CITY-ST-ZIP MIAMI FL 33144

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☒ DELETE

NAME RASCO, RAMON
STREET ADDRESS 901 S.W. 69TH AVENUE
CITY-ST-ZIP MIAMI FL 33144

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE: SIGNATURE REQUIRED

1/15/98 (205)261-4731

CR2E034 (10/97)