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

PROFIT CORPORATION ANNUAL REPORT

1998

*

東京の の 大田田の田田田 大



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 23 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700034398 (2)

ANDEAN SPRING FLOWERS, INC.

Principal Place of Business Mailing Address 201 S BISCAYNE BLVD 201 S BISCAYNE BLVD 1500 MIAMI CENTER 1500 MIAMI CENTER DO NOT WRITE IN THIS SPACE MIAMI FL 33131 MIAMI FL 33131 3. Date Incorporated or Qualified 04/16/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 50 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6, Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Ζıp Country 8. This corporation owes or has paid the current year Intargible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CORPORATION COMPANY OF MIAMI 201 S BISCAYNE BLVD 82 Street Address (P.O. Box Number is Not Acceptable) 1500 MIAMI CENTER 83 **MIAMI FL 33131** 84 City 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, typod or printed name of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE **GUILLERMO DUENAS ITURRALDE** NAME 1.2 NAME CARLOS A. BUITRON 477 AVENIDA AMAZONAS, OFICINA 207 STREET ADDRESS 1.3 STREET ADDRESS SHEH N.W. IHEST **Q**UITO, ECUADOR CITY-ST-ZIP 1.4 CITY-ST-ZIP CORDL SPRINCS DELETE Change Addition TITLE 2.1 TITLE JUAN PABLO DUENAS MORENO 2.2 NAME 477 AVENIDA AMAZONAS, OFICINA 207 STREET ADDRESS 2.3 STREET ADDRESS QUITO, ECUADOR CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME 5 a STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change 6.1 TITLE Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby 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 any 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 employaged 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.