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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V71721

ARGUELLES AND ARGUELLES, INC.

Mailing Address Principal Place of Business 9455 SW 78TH STREET 9455 SW 78TH STREET **MIAMI FL 33173** MIAMI FL 33173 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/12/1992 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 65-0377795 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5 Certificate of Status Desired Fee Required 22 27 City & State Election Campaign Financing \$5.00 May Be City & State Added to Fees Trust Fund Contribution 23 28 Country Country Zip This corporation owes the current year Intangible Zip □No. Yes Personal Property Tax 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SKRLD Street Address (P.O. Box Number is Not Acceptable) 201 ALHAMBRA CIRCLE **SUITE 1102** 83 CORAL GABLES FL 33134 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 Change DELETE 1 1 TITLE TITLE PD ARGUELLES, JR. DANIEL 2 NAME NAME 9455 SW 78TH STREET 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33173** 14 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 2.1 TITLE TITLE 22 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIF Addition Change □ DELETE 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE TITLE 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST ZIF 61 TITLE Change Addition

FILED Mar 16, 1999 8:00 am Secretary of State

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the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information tate and that my signature shall have the same legal effect as if made under oath; that I am an about this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supplemental annual report is true and ac officer or director of the corporation or the receiver or true ee empowered to Block 12 or Block 13 if changed, or on an attachment with an address, with ARGUEILES, JR. 3/4/99

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. I hereby certify that the information supplied with this filing does not qualify f

DELETE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP