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Mar 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000004374 (3)

1. Corporation Name:
GRAN VIA GROUP OF USA INC



Principal Place of Business
PENTHOUSE 101
48 E. FLAGLER STREET
MIAMI FL 33131

Mailing Address
PENTHOUSE 101
48 E. FLAGLER STREET
MIAMI FL 33131-1012

3. Date Incorporated or Qualified
09/11/1995
3a. Date of Last Report
04/24/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
52-1395392

Applied For
Not Applicable

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

22. City & State

27. City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

23. Zip

Country

28. Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

24.

25.

29.

30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LINDENFELD, DANYA
169 E. FLAGLER ST. #1620
MIAMI FL 33131

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 of the principal officer or registered agent of the corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PC
CHOCRON, SANTOS S
CARACAS
VENEZUELA

☐ DELETE

11. TITLE

☐ Change ☐ Addition

NAME

NAME

12. NAME

STREET ADDRESS

STREET ADDRESS

13. STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

14. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

WVC
LINDENFELD, ABRAHAM C
CARACAS
VENEZUELA

☐ DELETE

21. TITLE

☐ Change ☐ Addition

NAME

NAME

22. NAME

STREET ADDRESS

STREET ADDRESS

23. STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

24. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

SD
DE CHOCRON, VIOLETA L
CARACAS
VENEZUELA

☐ DELETE

31. TITLE

☐ Change ☐ Addition

NAME

NAME

32. NAME

STREET ADDRESS

STREET ADDRESS

33. STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

34. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

TD
LINDENFELD, MENDEL M
CARACAS
VENEZUELA

☐ DELETE

41. TITLE

☐ Change ☐ Addition

NAME

NAME

42. NAME

STREET ADDRESS

STREET ADDRESS

43. STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

44. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

TITLE

51. TITLE

☐ Change ☐ Addition

NAME

NAME

52. NAME

STREET ADDRESS

STREET ADDRESS

53. STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

54. CITY - ST - ZIP

☐ Change ☐ Addition

TITLE

TITLE

61. TITLE

☐ Change ☐ Addition

NAME

NAME

62. NAME

STREET ADDRESS

STREET ADDRESS

63. STREET ADDRESS

CITY - ST - ZIP

CITY - ST - ZIP

64. CITY - ST - ZIP

☐ Change ☐ Addition

14. I do 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

CR2E034 (9/96)