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PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE: X



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000023773 (2) DOCUMENT #

GENTLEMEN INVESTMENT GROUP, INC.

Mailing Address Principal Place of Business 1721 TIGERTRAIL AVE.

FILED Feb 25 1998 8:00am Secretary of State



1721 TIGERTRAIL AVE. COCONUT GROVE FL 33133 **COCONUT GROVE FL 33133** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/29/1994 Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 65-0647883 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing П Added to Fees Trust Fund Contribution 23 ZiD Country 8. This corporation owes or has paid the current year Intangible ZID Yes Yes Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name SILVA. JORGE E Grand Bay Plaza 2665 S. Bayshore Dr Street Address (P.O. Box Number is Not Acceptable) 236 VALENCIA AVENUE SUITE 601 В3 MIAMI FL 33133 Zip Code 85 **R4** City 33134 CORAL GABLES, 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 chango 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. DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Change DELETE TITLE 1.1 TITLE SILVA, CARLOS E 1.2 NAME NAME 1721 TIGERTRAIL AVE. 1.3 STREET ADDRESS STREET ADDRESS COCONUT GROVE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP ☐ Change Addition DELETE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CRY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CITY - ST - ZIP Change Addition DELFTE 4 1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DETERE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE DELETE. 61 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP of quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information use and accurate and that my signature shall have the same legal effect as if made under oath, that I am an accurate this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. Thereby certify that the information supplied with indicated on this annual report or suppliemental officer or director of the corporation or the recess Block 12 or Block 13 if changed or on an attack

CARLOS SIWA 2/18/98

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