

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

FILED

Mar 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 455803 (7)
1. Corporation Name
BUENOS AIRES INVESTMENTS CO., INC.

Principal Place of Business C/O RAUL J. VALDES-FAULI 3400 ONE BISCAYNE TOWER, 2 S BISC. BLVD. MIAMI FL. 33131	Mailing Address C/O RAUL J. VALDES-FAULI 3400 ONE BISCAYNE TOWER, 2 S BISC. BLVD. MIAMI FL. 33131
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/19/1975	
21. Suite, Apt. #, etc.	22. City & State	26. Suite, Apt. #, etc.	27. City & State	4. FEI Number 59-1814407	Applied For ☐ Not Applicable
23. Zip	25. Country	28. Zip	30. Country	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent VALDES-FAULI CORP SVCS INC ONE BISCAYNE TWR STE 3400 2 SO BISCAYNE BLVD MIAMI FL. 33131				10. Name and Address of New Registered Agent	
				81. Name	
				82. Street Address (P.O. Box Number is Not Acceptable)	
				83. City	
				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, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD GUTIERREZ, GUSTAVO	1.1 TITLE	☐ Change ☐ Addition
NAME	2 S BISCAYNE BLVD. #3400	1.2 NAME	
STREET ADDRESS	MIAMI FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	SD DEVILLEGAS, MARIA M.	2.1 TITLE	☐ Change ☐ Addition
NAME	2 S BISCAYNE BLVD. #3400	2.2 NAME	
STREET ADDRESS	AMI FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	TD DEMEJIA, ROSARIO G	3.1 TITLE	☐ Change ☐ Addition
NAME	2 S BISCAYNE BLVD. #3400	3.2 NAME	
STREET ADDRESS	MIAMI FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	DV DE GUTIERREZ, EMMA JARAMILLO	4.1 TITLE	☐ Change ☐ Addition
NAME	2 S BISCAYNE BLVD. #3400	4.2 NAME	
STREET ADDRESS	MIAMI FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	AS VALDES-FAULI, RAUL E.	5.1 TITLE	☐ Change ☐ Addition
NAME	2 S BISCAYNE BLVD. #3400	5.2 NAME	
STREET ADDRESS	MIAMI FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GUSTAVO GUTIERREZ 2/18/98 (305) 376-6023

CR2E034 (10/97)