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

FILED
Jun 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # V20618 (7)

1. Corporation Name
BANES DEVELOPMENT, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business
~~8390 N.W. 68TH STREET~~
~~MIAMI FL 33166~~

Mailing Address
~~8390 N.W. 68TH~~ STREET
~~MIAMI FL 33166~~

3. Date Incorporated or Qualified: 03/12/1992

4. FEI Number: 65-0397872 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

	2. Principal Place of Business		**2a.** Mailing Address
21	5455 SW 8 ST.	26	5455 SW 8 ST.
22	Suite, Apt. #, etc.: SUITE # 205	27	Suite, Apt. #, etc.: SUITE # 205
23	City & State: MIAMI, FL	28	City & State: MIAMI, FL
24	Zip: 33134	29	Zip: 33134
25	Country:	30	Country:

9. Name and Address of Current Registered Agent
~~GARCIA, WILLIAM~~
710 S. DIXIE HIGHWAY
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81	Name	JORGE M. GUARCH, JR.
82	Street Address (P.O. Box Number is Not Acceptable)	710 S. Dixie Highway
83		
84	City	CORAL GABLES FL
85	Zip Code	33146

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 ______ 6/8/98 DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	PARDO, FELIX	
STREET ADDRESS	8390 NW 68TH ST.	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☐ DELETE
NAME	ZALDIVAR, RAMON	
STREET ADDRESS	8390 NW 68TH ST.	
CITY-ST-ZIP	MIAMI FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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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 ______ FELIX PARDO 29 MAY 98 (305) 445 4566