SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

APPROVED AND FILED

98 JUL 24 PM 1:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # **L52053** **(0)**

1. Corporation Name
AFECOR INVESTMENTS, INC.

REINSTATEMENT 97-98
DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
2025 BRICKELL AVENUE APT #1003 MIAMI FL 33129 US	2025 BRICKELL AVENUE APT #1003 MIAMI FL 33129 US

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: **02/19/1990**
3a. Date of Last Report: **10/14/1996**
4. FEI Number: **65-0362342** ☐ 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

9. Name and Address of Current Registered Agent

KORGE, PA, THOMAS J
200 SOUTH BISCAYNE BLVD.
#2100
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: RAQUEL MATAS, ESQ.
82 Street Address (P.O. Box Number is Not Acceptable): 100 S.E. 2nd Street
83 Suite 4000
84 City: Miami FL 85 Zip Code: 33131

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: Raquel Matas (Signature or type-in-box must be that of registered agent for new registered agent) (NOTE: Registered Agent signature required when reinstating) DATE: 6/24/98

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☒ DELETE	1.1 TITLE	~~Raquel Matas~~	☒ Change ☐ Addition
NAME	ASTUDILLO, ALEX		1.2 NAME		
STREET ADDRESS	9270 BIRD RD		1.3 STREET ADDRESS	~~Resident Agent~~	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	~~100 S.E. 2nd St Miami, FL 33131~~	
TITLE	DCPS	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CORDRO FEBRES, CARLOS		2.2 NAME		
STREET ADDRESS	2025 BRICKELL AVENUE #1003		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33129		2.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	CORDRO FEBRES, CARLOS		3.2 NAME		
STREET ADDRESS	2025 BRICKELL AVENUE #1003		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33129		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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****908.75 ****908.75

CR2E034 (4/97)

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 I am attaching an attachment with an address.

SIGNATURE:

CARLTON FIELDS

ATTORNEYS AT LAW

4000 INTERNATIONAL PLACE
100 S. E. SECOND STREET
MIAMI, FLORIDA 33131

MAILING ADDRESS:
P.O. BOX 019101, MIAMI, FL 33131-9101
TEL (305) 530-0050 FAX (305) 530-0055

June 4, 1998

Secretary of State
Florida Division of Corporations
P.O. Box 5588
Tallahassee, FL 32314

Attention: Reinstatement

RE: Afecor Investments, Inc.

Dear Sir or Madam:

Enclosed please find the following for filing with the Secretary of State:

1. Reinstatement form for the reference.

Also enclosed please find check in the amount of $908.75 to cover the expense of the following:

1. Reinstatement of the reference ($900.00); and
2. Cost of a certificate of good standing ($8.75).

Please return the certificate of good standing to the undersigned at your earliest convenience.

If you have any questions or comments, please contact the undersigned.

Sincerely,

Jorge I.G. del Valle

Enclosures

::ODMA\SOFTSOL\311\MIA01\1189703\0