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

Feb 18 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 345651 MERCE LAND CO., INC. Principal Place of Business Mailing Address 2650 COUNTRY CLUB PRADO 2650 COUNTRY CLUB PRADO **CORAL GABELS FL 33134** CORAL GABELS FL 33134 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/05/1969 2a. Mailing Address 4. FEI Number Applied For 26 2650 COUNT 59-1304678 Not Applicable \$8.75 Additional 5. Certificate of Status Desired OBAL Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible 11.5/1 g, Name and Address of Current Registered ☐ Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 81 Name **ESTARELLAS, MERCEDES** 9485 SUNSET DR. Street Address (P.O. Box Number is Not Acceptable) 82 **SUITE A-252** 83 **MIAMI FL 33173** 64 City 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. Jesus Estarellas OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change TITLE 11 TITLE **ESTARELLAS, JESUS** NAME 1.2 NAME 9485 SUNSET DR., SUITE A-252 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE **ESTARELLAS.MERCEDES** 2.2 NAME NAME 9485 SUNSET DR., SUITE A-252 2.3 STREET ADDRESS STREET ADORESS MIAMI FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELFTE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY+S1-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITL€ 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

14. Thereby 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 13 if changed, going an attrichment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADORESS

SIGNATURE:

CITY-ST-ZIP

FILED