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Mar 03 1997 8:00am
Secretary of State

**PROFIT
CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # 348205 (6)
1. Corporation Name
SOUTHERN PENINSULAR LAND DEVELOPMENT, INC.



Principal Place of Business

**782 NW 42ND AVENUE
SUITE 348
MIAMI FL 33126
US**

Mailing Address

**782 NW 42ND AVENUE
SUITE 348
MIAMI FL 33126-5550
US**

2. Principal Place of Business

21 782 NW 42ND AVENUE

Suite, Apt. #, etc.

22 SUITE 534

City & State

23 MIAMI, FL

Zip

24 33126

Country

25

2a. Mailing Address

26 782 NW 42ND AVENUE

Suite, Apt. #, etc.

27 SUITE 534

City & State

28 MIAMI, FL

Zip

29 33126

Country

30

9. Name and Address of Current Registered Agent

**ACOSTA, ALEJANDRO
12060 N.W. S. RIVER DRIVE
MEDLEY FL 33178**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VD** ☐ DELETE

NAME **ACOSTA, ALEJANDRO**
STREET ADDRESS **12060 NW S RIVER DRIVE**
CITY - ST - ZIP **MEDLEY, FL 00000**

TITLE **PD** ☐ DELETE

NAME **ELORTEGUI, RAFAEL**
STREET ADDRESS **782 NW 42ND AVENUE #348**
CITY - ST - ZIP **MIAMI FL**

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY - ST - ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY - ST - ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY - ST - ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY - ST - ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

**12060 NW S RIVER DRIVE
MEDLEY, FL 33178**

1.4 CITY - ST - ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

**782 NW 42ND AVENUE #534
MIAMI, FL 33126**

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

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 on an attachment with an address.

SIGNATURE: RAFAEL ELORTEGUI

(305) 442-4665

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)