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

SIGNATURE:

Apr 01 1998 8:00am RROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 368686 ALOGA CORPORATION OF FLORIDA Principal Place of Business Mailing Address % MARCIA B. CABALLERO % MARCIA B. CABALLERO 2450 SW 137TH AVE. S-221 2450 SW 137TH AVE. S-221 DO NOT WRITE IN THIS SPACE MIAMI FL 33175 MIAMI FL 33175 3. Date Incorporated or Qualified 08/20/1970 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-1315017 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. 🕜 Yes □ No 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CABALLERO, MARCIA B. 2450 S.W. 137 AVE 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL FL 33135 83 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. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 T!TLE SD DELETE 1.3 TITLE Change ☐ Addition NAME galan F. Manuel V. 1.2 NAME 2450 SW 137 AVENUE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE DE GALAN, ALICIA RIESGO NAME 2.2 NAME 2450 SW 137 AVENUE STREET ADDRESS 2.3 STREFT ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP ■ DELETE Change Addition 3.1 TITLE TITLE CARBALLEIRA DE LOPEZ MARIA ROSA NAME 3.2 NAME 2450 SW 137 AVENUE STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE CARBALLEIRA, RAMON 4. 2 NAME STREET ADDRESS 2450 SW 137 AVE 4.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME 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 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.

PRESIDENT

MARIA BUSA CARBALLET RA DE LOPEZ

3/1/2

FILED