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Jan 23 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 # 417518 (8)

1. Corporation Name
LAND INVESTMENT, INC.

Principal Place of Business
2332 VERO BEACH AVE.
VERO BEACH FL 32960
US

Mailing Address
2332 VERO BEACH AVE.
VERO BEACH FL 32960-4143
US



2. Principal Place of Business

2a. Mailing Address

21 4316 2nd Square SW.

26 Land Investment

22 Suite, Apt. #, etc.
VERO Beach, FL

27 Suite, Apt. #, etc.
4316 2nd sq SW

23 City & State
32968 Indian River

28 City & State
VERO Beach, FL

24 Zip
25 Country

29 Zip
30 Country

24 32968 25

29 32968 30 Indian River

9. Name and Address of Current Registered Agent

LATOUR, JORGE A.
2332 VERO BEACH AVE.
VERO BEACH FL 32960

3. Date Incorporated or Qualified
01/26/1973

3a. Date of Last Report
05/01/1996

4. FEI Number
59-1516673

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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name Rubio, Miguel E.

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

83 4316 2nd Square S.W.

84 City VERO Beach FL 85 Zip Code 32968

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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE Miguel E. Rubio Miguel E. Rubio Pres. 1/17/97

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RUBIO, MIGUEL	
STREET ADDRESS	4316 2ND SQ. SW	
CITY-ST-ZIP	VERO BCH FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	SANCHEZ, ALBERTO	
STREET ADDRESS	13334 POLO CLUB RD #338-39	
CITY-ST-ZIP	W PALM BCH FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	BROWN, MARIA C.	
STREET ADDRESS	13334 POLO CLUB RD., #339	
CITY-ST-ZIP	WELLINGTON FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	SANCHEZ ALBERTO	
STREET ADDRESS	13334 POLO CLB RD., #339	
CITY-ST-ZIP	WELLINGTON FL	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	GERALD A. MARTIN	
STREET ADDRESS	2304 S. MILITARY TRAIL	
CITY-ST-ZIP	WEST PALM BCH. FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	VD Josafina Rubio Mobley
2.3 STREET ADDRESS	1025 COTOREO AVE
2.4 CITY-ST-ZIP	CORAL GABLES, FL 33146
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	TD Ernesto G. Rubio
3.3 STREET ADDRESS	1112 PARK DRIVE
3.4 CITY-ST-ZIP	ELIZABETH CITY, NC 27909
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	SD Ernesto G. Rubio
4.3 STREET ADDRESS	1112 PARK DRIVE
4.4 CITY-ST-ZIP	ELIZABETH CITY, NC 27909
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 in an attachment with an address.

SIGNATURE: Miguel E. Rubio Miguel E. Rubio 1/17/97 (56) 569-8530

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0107800

CR2E034 (9/96)