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

**FILED** PROFIT Jan 26 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (8)443089 LE JEUNE DEVELOPMENT CORP. Principal Place of Business Mailing Address 3934 NW 24 ST. 3934 NW 24 ST. MIAMI FL 33142 MIAMI FL 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/31/1973 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 26 59-1568152 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes Yes 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BRAULIO, FERNANDEZ 11950 S W 24TH TERR Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33175** 83 84 City Zip Čođe 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1177716 TITLE FERNANDEZ, BRAULIO NAME 1.2 NAME 8-3-97 DIE 11950 S W 24 TERR 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE PRESIDENT -FERNANDEZ, CLARA NAME 2.2 NAME 11950 SW 24 TERRACE STREET ADDRESS 2.3 STREET ADDRESS MIAMI F CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TIT! F 3.1 TITLE\_\_\_\_\_ NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change 5.1 TITLE Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE 6.2 NAME NAME

SIGNATURE:

Block 12 or Block 13 if changed, or an an affachment with an addre

STREET ADDRESS

CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling close not qualify for the exemption stated in Section 119.07(3)(1). 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 cath; that I am an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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1-14-98