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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 628154

(7)

FILED Jan 29 1998 8:00am Secretary of State

CABRERA-REGUEYRA CORPORATION Principal Place of Business Mailing Address % ELLIOTT HARRIS. ESO. % ELLIOTT HARRIS, ESQ. 111 S.W. 3RD ST., SIXTH FL 111 S.W. 3RD ST., SIXTH FL DO NOT WRITE IN THIS SPACE MIAMI FL 33130 MIAMI FL 33130 3. Date Incorporated or Qualified 07/02/1979 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-1967997 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. **\$8.75** Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year intangible 24 25 30 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HARRIS, ELLIOTT ESQ. 111 S.W. 3RD ST. Street Address (P.O. Box Number is Not Acceptable) SIXTH FLOOR 83 MIAMI FL 33130 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) DATE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change NAME PEREZ, LUIS ALBERTO 1.2 NAME STREET ADDRESS 111 SW 3RD ST, 6 FLOOR 1.3 STREET ADDRESS CITY - ST - ZIP MIAMI FL 1.4 CITY - ST - ZIP TITLE SP DELETE 2.1 TITLE ☐ Change Addition NAME HARRIS, ELLIOTT 2.2 NAME 111 SW 3 ST, 6 FLOOR STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ DELETE TITLE 6.1 TITLE Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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:

CITY - ST - ZIP

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