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

**PROFIT** Mar 17 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # 830983 (3)ECUPLAS, S. A. Principal Place of Business Mailing Address 7700 NW 73RD COURT 7700 NW 73RD COURT C/O VARKO, INC. C/O VARKO, INC. DO NOT WRITE IN THIS SPACE MEDLEY FL 33168 MEDLEY FL 33166 3. Date Incorporated or Qualified 10/03/1973 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 59-1651242 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees ZiD Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MACAU, GASTON 7700 NW 73RD COURT Street Address (P.O. Box Number is Not Acceptable) C/O VARKO, INC. R3 MEDLEY FL 33166 84 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE ☐ Change Addition TITLE 1.1 TITLE MACAU, GASTON A 1.2 NAME NAME 7700 NW 73RD COURT STREET ADDRESS 1.3 STREET ADDRESS MEDLEY FL 33166 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE VALDES, IDA NAME 2.2 NAME 7700 NW 73RD COURT STREET ADDRESS 2.3 STREET ADDRESS MEDLEY FL 33166 2. 4 CITY - ST - ZIP CITY-ST-ZIP DS DELETE Addition TITI F 3.1 TITLE SANCHEZ, GUILLERMO NAME 3.2 NAME 7700 NW 73RD COURT STREET ADDRESS 3.3 STREET ADDRESS MEDLEY FL 33166 CITY-ST-ZIP 3.4. CITY-ST-ZIP Change ☐ DELETE Addition TITLE NAME 4.2 NAME 395 ALHAMBRA CHICLE, STE. 200 STREET ADDRESS STREET ADDRESS CORAL GABLES, FL 00000 CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 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 6.4 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.

Gullermo a Sanchez (Secretary)

03/04/98

1-305-1283456

**FILED**