

# 2004 FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 02, 2004 8:00 am**  
**Secretary of State**

03-02-2004 90048 003 \*\*\*150.00

**DOCUMENT # F97000006036**

1. Entity Name

IBERCONDOR, S.A.



Principal Place of Business

IBERCONDOR S.A. MIAMI AGENCY  
6991 N.W. 51 STREET  
MIAMI FL 33166

Mailing Address

IBERCONDOR S.A. MIAMI AGENCY  
6991 N.W. 51 STREET  
MIAMI FL 33166

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **98-0179288**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SETCHEN, JASON A ESQ  
999 PONCE DE LEON  
SUITE 605  
CORAL GABLES FL 33134

Name

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

City

**FL**

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CV ☐ Delete  
NAME EL REZ, WAEL  
STREET ADDRESS C/ JOSELITO NO 18  
CITY-ST-ZIP MADRID, SPAIN

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VC ☐ Delete  
NAME LOPEZ MATRAN, ANTONIO  
STREET ADDRESS C/ VALLE DE TENA NO 12 BOADILLA DEL MONTE  
CITY-ST-ZIP MADRID, SPAIN

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE P ☐ Delete  
NAME LOPEZ, ANTONIO  
STREET ADDRESS C/ VALLE DE TENA NO 12 BOADILLA DEL MONTE  
CITY-ST-ZIP MADRID, SPAIN

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Delete  
NAME MARQUEZ GOITIA, JUAN FRANCISCO  
STREET ADDRESS C/PLAYA DE ASTILLEROS NO 16  
CITY-ST-ZIP SPAIN

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME PEREZ, JAVIER  
STREET ADDRESS AVENIDA SAN LUIS 166 3EROC, 28033  
CITY-ST-ZIP MADRID, SPAIN

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE M ☒ Delete  
NAME LOPEZ, OSCAR  
STREET ADDRESS 9878 COSTA DEL SOL BLVD  
CITY-ST-ZIP MIAMI FL 33178

TITLE M ☐ Change ☒ Addition  
NAME MONICA VALDES  
STREET ADDRESS 15242 S.W. 27STREET  
CITY-ST-ZIP MIAMI, FL. 33185

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/24/04

Date

305436 6099

Daytime Phone #