

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 20, 1999 8:00 am  
Secretary of State

04-20-1999 90238 008 \*\*\*158.75

DOCUMENT # F98000003065

1. Corporation Name

PLAZA PUERTO RICO MANAGEMENT, INC.



Principal Place of Business

N-1, TORTOLA ST., URB. TIERRA ALTA II  
GUAYNABO, PR 00969  
OC

Mailing Address

N-1, TORTOLA ST., URB. TIERRA ALTA II  
GUAYNABO, PR 00969  
OC

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/29/1998

4. FEI Number

66-0532586

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 28801-29129 US 19N

Suite, Apt. #, etc.

22 Suite 105

City & State

23 Clearwater FL

Zip Country

24 00927 25 00927

29 00927 30 Puerto Rico

2a. Mailing Address

26 MSC 621 89 De Diego AVE.

Suite, Apt. #, etc.

27 Suite 105

City & State

28 San Juan

Zip

Country

30 Puerto Rico

9. Name and Address of Current Registered Agent

COLL, MARTA SEIN  
5042, CROSS POINTE DR.  
OLDSMAR FL 34677

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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

N/A

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE CP  
NAME SELGER, SERGIO GABRIEL  
STREET ADDRESS N-1, TORTOLA ST., URB. TIERRA ALTA II  
CITY-ST-ZIP GUAYNABO, PR 00969

TITLE DST  
NAME FEINBERG, MINDY  
STREET ADDRESS N-1, TORTOLA ST., URB. TIERRA ALTA II  
CITY-ST-ZIP GUAYNABO, PR 00969

TITLE D  
NAME NATHAN, CLARA ZARAGOZA  
STREET ADDRESS #903, MARBELLA COND., ISLA VERDE RD.  
CITY-ST-ZIP CAROLINA, PR 00979

TITLE  
NAME N/A  
STREET ADDRESS N/A  
CITY-ST-ZIP N/A

TITLE  
NAME N/A  
STREET ADDRESS N/A  
CITY-ST-ZIP N/A

TITLE  
NAME N/A  
STREET ADDRESS N/A  
CITY-ST-ZIP N/A

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

N/A

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

N/A

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

N/A

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

N/A

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

N/A

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

N/A

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0564130

11/1/99 141000