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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

DOCUMENT # G56096

VIAREGIO CORP.

SIGNATURE:

Jan 30 1997 8:00am Sandra B. Mortham Secretary of State Secretary of State DIVISION OF CORPORATIONS (2)

FILED

'- <u>フェラフ (305)262-2351</u>

| Principal Place of Business | | Mailing Address | | | TROS TRAID NEOLO PROPER DIGITAL CONTRACTOR |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-----------------------------------|--------------------------------------------------------------------------------------|--------------------------------------------------|
| C/O MENDEZ-INSUA & ASSOC. B300 S.W. 8TH ST #303 MIAMI FL 33144 | | C/O MENDEZ-INSUA & ASSOC. 8300 S. W. 8TH ST., #303 MIAMI FL 33144-4132 | | | |
| US | | US | | 3. Date Incorporated or Qualified 08/16/1983 | 3a. Date of Last Report 04/09/1996 |
| | ace of Business C/O | 2a. Mailing Address | | 4. FEI Number | Applied For |
| | Z-INSUA & CO. PA | 26 C/O MENDEZ | -INSUA & CO | PA 59-2626756 | Not Applicable |
| Suite, Apt | | Suite, Apt. #, etc. | • | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| | | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 Zip | Country | Z ip | Country | Trust Fund Contribution | Added to Fees |
| 24 | 25 | 29 | 30 | 8. This corporation has liability for in Florida Statutes | ntangible tax under s. 199.032, Yes D No |
| | 9. Name and Address of Current | | 1901 | 10. Name and Address of New Reg | |
| NIETO S RENIGNO 81 Name | | | | | |
| Nieto S., Benigno | | | | | |
| MIAMI FL 33135 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | a) |
| | | | 83 3 | 15 N.W. 57 Court. | |
| 84 City Mi | | | | iami, Fla. | FL 85 33126 |
| 11. Pursuant 1 | to the provisions of Sections 607 0502 | and 607 1508. Florida Statut | es the above-named cor | noration submits this statement for the n | |
| office or re | egistered agent, or both, in the State of m familiar with, and accept the obligati | f Florida. Such change was a | authorized by the corpora | poration submits this statement for the pution's board of directors. I hereby accept | the appointment as registered |
| | arraminal with, and accept the obligan | ons or, dection our good, Fit | unua statutes. | | |
| SIGNATURE . | Signature, type dipriprioted name of registered agent | and their applicative. (NOT | E Registered Agent signature requ | red when reinstating) | DATE |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICE | ERS AND DIRECTORS IN 12 |
| TITLE | TPD | ☐ DELETE | 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME | GONZALEZ, ERNESTO | | 1.2 NAME | | |
| STREET ADDRESS | 2140 W. FLAGLER ST. | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL | | 1.4 CITY-ST-ZIP | | |
| TITLE | VSD | ☐ DELETE | 2.1 TITLE | | Change Addition |
| NAME | NIETO, BENIGNO S. | | 2.2 NAME | | ľ |
| STREET ADDRESS | 2276 S.W. 4 ST | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | MIAMI FL | I DELETE | 2.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | | DELETE | 3.4 CITY-ST-ZIP 4.1 TITLE | | Change Addition |
| NAME | | | 4. 2 NAME | | the committee of the control of |
| 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 | | 10/ |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | 112 // |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | • | (), () |
| Tifté | | DELETE | 6 1 TITLE | ور سادت سادن در این این این در | Change Addition |
| NAME | | | 6.2 NAME | 30000207 -01/31/970100 | 7002 |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | ***165.00 | 1 000 |
| CITY - ST - ZIP | | | 6.4 CITY - ST - ZIP | | |
| 14. I do hereb | by certify that the information supplied in indicated on this applied report or any | with this filing does not quali | fy for the exemption state | d 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 logal 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 Blook 13 if changed, or on an attachment with an address. | | | | | |