

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **K27571** 1. Corporation Name

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90004 050 ***150.00

SPAIN T	EXTILE CORP.							
Principal Place	e of Business	Mailing Address					OLI BIBIL BIL	814 A1911 A1914 1AA1
VIII.0.								
3100 NW 72 AVE #123 3100 NW 72 AVE #123 MIAMI FL 33122 MIAMI FL 33122						DO NOT WRITE IN THIS	SPACE	
ļ						3. Date Incorporated or Qualifed		
						07/01/1988		
Principal Place of Business 2a. Mailing Address						4, FEI Number	TT	Applied For
						65-0058540		Not Applicable
21 26				*			\$8.75 Additional	
22		27				5, Certificate of Status Desired	Fee	Required
City & Stat	e	City & State				6. Election Campaign Financing	\$5.0	0 May Be
23		28				Trust Fund Contribution	Adde	d to Fees
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Inte		□w-
24	25		30			Personal Property Tax.	Yes	□No
	9. Name and Address of Curre	nt Registered Agent		81	Nama	10. Name and Address of New Registered	-gent	
040	TOO CADLOS ALBEDTO			01	Name			
CASTRO, CARLOS ALBERTO 1001 SO. BAYSHORE DRIVE				82	Street Addr	ess (P.O. Box Number is Not Acceptable)		
SUITE 2410 MIAMI FL 33131				83				
				03			:	
IVIIA	WI FE 33131			84	City	FL	85 Z	ip Code
l office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Flonda. Such change was at lations of, Section 607.0505, Floo	ida Stati	ites.	me corporatio	oration submits this statement for the purpose of on's board of directors. I hereby accept the appoint when reinstating?	changing ntment as	its registered s registered
	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE ND DIRECTORS	Registered	Agen	t signature require	d when reinstating) ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	TORS IN 12
TITLE	P	DELETE	1.1 717	î.E	$\overline{}$	ADDITIONOUS INTEREST	. Chang	
ļ ·	MARTINEZ, RICARDO		1.2 NA					
NAME	251 CRANDON BLVD, #629		1		ADDRESS			
STREET ADDRESS	KEY BISCAYNE FL 33149		1.4 CF		1			
CITY-ST-ZIP	REI BISCATNE PE 33149	☐ DELETE	2.1 TI				☐ Chang	ge 🔲 Addition
NAME			2.2 N	ME	-			
STREET ADDRESS			2.3 \$1	REET	ADDRESS			
CITY-ST-ZIP			2.4 C			•		
TITLE		☐ DELETE	3.1 TI				Chan	ge
NAME			3.2 NA	ME				
STREET ADDRESS			3.3 ST	REET	ADDRESS			
CITY-ST-ZIP			3.4. C	<u> TY</u> -\$	T-ZIP			
TITLE		☐ DELETE	4.1 11	TLE			Chan	ge Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 \$7	REET	T ADDRESS			
CITY-ST-ZIP			4.4 CI	TY-S1	T-ZIP			
TITLE		☐ DELETE	5.1 TI				☐ Chan	ge
NAME			52 N					
STREET ADDRESS					FADDRESS			
CITY-ST-ZIP			5.4 CI		T-ZIP			ng D Addition
TITLE		☐ DELETE	6.1 TI				☐ Chan	ige 🔲 Addition
NAME			6.2 N					
STREET ADDRESS					ADDRESS			
			6,4 CI					

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 ether like empowered.

SIGNATURE: ** RICAR SO MARTINE RESIDENCE OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR