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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 APR 28 AM 11:34

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # K76336

1. Corporation Name

ACER LATIN AMERICA, INC.

Principal Place of Business

Mailing Address

1701 NW 87th Ave.
MIAMI FL 33172

1701 NW 87th Ave.
Att: EDWIN CABRERA
Miami, FL 33172

3. Date Incorporated or Qualified

3/29/1989

3a. Date of Last Report

4/26/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

4. FEI Number

65-0130985

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

81 Name

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

83

84 City

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

(Signature) and printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

11.1 TITLE ☐ DELETE

11.2 NAME

11.3 STREET ADDRESS

11.4 CITY-STATE-ZIP

11.5 TITLE ☐ DELETE

11.6 NAME

11.7 STREET ADDRESS

11.8 CITY-STATE-ZIP

11.9 TITLE ☐ DELETE

11.10 NAME

11.11 STREET ADDRESS

11.12 CITY-STATE-ZIP

11.13 TITLE ☐ DELETE

11.14 NAME

11.15 STREET ADDRESS

11.16 CITY-STATE-ZIP

11.17 TITLE ☐ DELETE

11.18 NAME

11.19 STREET ADDRESS

11.20 CITY-STATE-ZIP

11.21 TITLE ☐ DELETE

11.22 NAME

11.23 STREET ADDRESS

11.24 CITY-STATE-ZIP

11.25 TITLE ☐ DELETE

11.26 NAME

11.27 STREET ADDRESS

11.28 CITY-STATE-ZIP

11.29 TITLE ☐ DELETE

11.30 NAME

11.31 STREET ADDRESS

11.32 CITY-STATE-ZIP

11.33 TITLE ☐ DELETE

11.34 NAME

11.35 STREET ADDRESS

11.36 CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE ☐ Change ☐ Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-STATE-ZIP

13.5 TITLE ☐ Change ☐ Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY-STATE-ZIP

13.9 TITLE ☐ Change ☐ Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY-STATE-ZIP

13.13 TITLE ☐ Change ☐ Addition

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY-STATE-ZIP

13.17 TITLE ☐ Change ☐ Addition

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY-STATE-ZIP

13.21 TITLE ☐ Change ☐ Addition

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY-STATE-ZIP

13.25 TITLE ☐ Change ☐ Addition

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY-STATE-ZIP

13.29 TITLE ☐ Change ☐ Addition

13.30 NAME

13.31 STREET ADDRESS

13.32 CITY-STATE-ZIP

13.33 TITLE ☐ Change ☐ Addition

13.34 NAME

13.35 STREET ADDRESS

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EDWIN CABRERA Asst. Secy of Corp.

Date

Daytime Phone

4-24-97

CR2E034 (9/96)