

3-10-98 B 3051 C
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Mar 10 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # L15277 (1)

1. Corporation Name
RIO DE LA PLATA LANGUAGE SCHOOL, INC.

Principal Place of Business

1500 S. DIXIE HWY.
SUITE 350
CORAL GABLES FL 33146
US

Mailing Address

1500 S. DIXIE HWY.
SUITE 350
CORAL GABLES FL 33146
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/13/1989

4. FEI Number

65-0143146

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 owes or has paid the current year intangible
Personal Property Tax due June 30.

☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

VIGGIANI, MIRIAM R.
9167 SW 97 AVE
MIAMI FL 33176

10. Name and Address of New Registered Agent

81 Name

VIGGIANI, MIRIAM R

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

20053 SW 103 AVENUE

83

84 City

MIAMI

FL

85 Zip Code

33189

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3/3/98

12. OFFICERS AND DIRECTORS

TITLE PD
NAME VIGGIANI, MIRIAM R.
STREET ADDRESS 9167 SW 97 AVE
CITY-ST-ZIP MIAMI FL

TITLE V
NAME VIGGIANI, GABRIELA E
STREET ADDRESS 7745 SW 86 STREET #D318
CITY-ST-ZIP MIAMI FL 33143

TITLE V
NAME VIGGIANI, NORMAN E
STREET ADDRESS 9167 SW 97 AVE
CITY-ST-ZIP MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME VIGGIANI, MIRIAM R
1.3 STREET ADDRESS 20053 SW 103 AVENUE
1.4 CITY-ST-ZIP MIAMI, FL 33189

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

3.1 TITLE V
3.2 NAME VIGGIANI, NORMAN E
3.3 STREET ADDRESS 20053 SW 103 AVENUE
3.4 CITY-ST-ZIP MIAMI, FL 33189

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

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

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

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.

SIGNATURE

Miriam R. Viggiani

3/3/98 (305) 667-4224

CR2E034 (10/97)