

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

DOCUMENT # L19609 (1)

1. Corporation Name

BIV INVESTMENTS AND MANAGEMENT, INC.

95 APR 28 PM 1:08

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business

**1101 BRICKELL AVE
STE 701
MIAMI FL 33131
US**

Mailing Address

**1101 BRICKELL AVE
STE 701
MIAMI FL 33131
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/29/1989

3a. Date of Last Report

03/04/1994

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

65-0145363

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 has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**ALVARES, VICTOR
% WHITE & CASE
200 SO BISCAYNE BLVD, STE 4900
MIAMI FL 33131**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

P

**DAZA-PEREZ, ANTONIO
1101 BRICKELL AVE, STE 701
MIAMI FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

V

**OJEDA, LUIS M
1101 BRICKELL AVE, STE 701
MIAMI FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

S

**GARMENDIA-BRICENO, CECILIA
1101 BRICKELL AVE, STE 701
MIAMI FL**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

T

**PADILLA, ROMULO
1101 BRICKELL AVE, STE 701
MIAMI FL**

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

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

P

**VALLENILLA, DIEGO ARNAL
CARACAS, VENEZUELA**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

V

**FEBRES-CORDERO, RAFAEL
CARACAS, VENEZUELA**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

S

**PECHE, ANGEL
1101 BRICKELL AVENUE, STE 701
MIAMI, FL 33131**

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

T

**BARROS-LLOBELL, SILVINA
1101 BRICKELL AVENUE, STE 701
MIAMI, FL 33131**

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

EXPIRATION / TERM #