FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED Apr 14 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # MIRAVALLE INC. Principal Place of Business Mailing Address % JOSE HERNANDEZ % JOSE HERNANDEZ 10698 SW 24TH ST 10698 SW 24TH ST DO NOT WRITE IN THIS SPACE MIAMI FL 33165 MIAMI FL 33165 3. Date Incorporated or Qualified 12/01/1989 2. Principal Place of Business 2a. Mailing Address Applied For 65-0157691 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes ☐ No 25 29 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HERNANDEZ, JOSE 10698 SW 24TH ST 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33165** 83 Zip Code 84 City 85 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. Thereby accept the appointment as registered agent, it am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or pointed name of registered agent and too if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DILFTE Change Addition 1 1 TITLE TITLE HERNANDEZ, JOSE 1.2 NAME CR2E034 NAME 10698 SW 24TH ST 1.3 STREET ADDRESS STREET ADDRÉSS MIAMI FL 14 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TOTAL TITLE HERNANDEZ, RUTH 2.2 NAME NAME 10698 SW 24TH ST 23 STREET ADDRESS STREET ADDRESS MIAM! FL CITY-ST-ZIP 2. 4 City - St - ZiP Change Addition DELETE 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4 CHY-ST-7IP Change Addition DELETE TITLE 41 THILE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELFTE Change Addition TITLE 5.1 THE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 THUE NAME 6.2 NAME

6.3 STREET ADDRESS 64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

14. Increby certify that the information supplied with this filing closs 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 suppliencental 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 or an attactyment with an address.