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

Mar 17 1998 8:00am **PROFIT** ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # L61425 (9)VILLAGE DEVELOPMENT INC. Principal Place of Business Mailing Address MJOSE RAMON BOSCHETTI %JOSE RAMON BOSCHETTI 2901 SW 8TH ST., STE. 204 2901 SW 8TH ST., STE. 204 DO NOT WRITE IN THIS SPACE MIAM! FL 33135 MIAMI FL 33135 3. Date Incorporated or Qualified 03/30/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2044626 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing Trust Fund Contribution 23 Added to Fees 28 Zip Country Country Zip This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BOSCHETTI, JOSE RAMON** 2901 \$W 8TH ST., STE. 204 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33135** 83 84 City 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 10/97 OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change TITLE BOSCHETTI, RAFAEL J. NAME 1.2 NAME CR2E034 2901 SW 8TH ST., #204 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 City-ST-ZIP DELETÉ Change Addition **VPST** TITLE 2.1 TITLE **BOSCHETTI, JOSE RAMON** NAME 2.2 NAME 2901 SW 8TH ST., #204 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE 31 TITLE MAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE

14. Thereby certify that the information supplied with his 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 Auptenmental chinal peport 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 page way of sustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on a summary of the period of the corporation of the corporat

6.2 NAME

**6.3 STREET ADDRESS** 

SIGNATURE:

NAME STREET ADDRESS

CITY-ST-ZIP

3/9/98

(305) 5417150

FILED