

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

95 APR 21 PM 1:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L73582 (3)

1. Corporation Name

G'VAN INVESTMENTS, INC.

Principal Place of Business

1101 BRICKELL AVENUE, SUITE 401  
MIAMI FL 33131  
US

Mailing Address

1101 BRICKELL AVENUE, SUITE 401  
MIAMI FL 33131  
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

05/15/1990

3a. Date of Last Report

04/28/1994

4. FEI Number

65-0190497

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fees Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under S. 199.022,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

ANGULO, FRANCISCO  
1101 BRICKELL AVENUE  
SUITE #401  
MIAMI FL 33131

10. Name and Address of New Registered Agent

B1 Name

Patricio Silva

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

1101 Brickell Avenue

B3

Suite #401

B4 City

Miami

FL

B5 Zip Code

33131

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, which 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 translating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S  
NAME SILVA, PATRICIO  
STREET ADDRESS 1101 BRICKELL AVE. #401  
CITY-ST-ZIP MIAMI FL

TITLE DT  
NAME ANGULO, FRANCISCO  
STREET ADDRESS 1101 BRICKELL AVE., #401  
CITY-ST-ZIP MIAMI FL

TITLE DP  
NAME VOLLMER, GUSTAVO J  
STREET ADDRESS 1101 BRICKELL AVE., #401  
CITY-ST-ZIP MIAMI FL

TITLE D  
NAME DE VOLLMER, ANA TERESA  
STREET ADDRESS 1101 BRICKELL AVENUE  
CITY-ST-ZIP MIAMI, FL 33131

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 SILVA, PATRICIO ☒ Change ☐ Addition  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME Luis Enrique Lopez ☒ Change ☐ Addition  
2.3 STREET ADDRESS 1101 Brickell Avenue, #401  
2.4 CITY-ST-ZIP MIAMI, FL. 33131

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

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

5.1 TITLE  
5.2 NAME Domingo Torres ☐ Change ☒ Addition  
5.3 STREET ADDRESS 1101 Brickell Avenue, #401  
5.4 CITY-ST-ZIP MIAMI, FL. 33131

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

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 record or trustee empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or as an attachment with an address.

SIGNATURE:

Signature and typed or printed name of signing officer or director

4/13/95

358-7261