

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # M08975

1. Entity Name
REBARBIER, INC.



Principal Place of Business
**2600 S.W. THIRD AVE.
SUITE 800
MIAMI, FL 33129**

Mailing Address
**2600 S.W. THIRD AVE.
SUITE 800
MIAMI, FL 33129**

DO NOT WRITE IN THIS SPACE



04282004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-2482148	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION COMPANY OF MIAMI
1500 MIAMI CENTER
201 S. BUSCAINE BLVD.
MIAMI, FL 33131**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

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

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ACEVEDO, RAFAEL A. 2600 SW THIRD AVE. STE. 800 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS ALTABA, ANDRES 2600 SW THIRD AVE., STE. 800 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MORANDINI, MARIO 2600 SW THIRD AVE., STE. 800 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ALTABA, ERICH 2600 SW THIRD AVE., STE. 800 MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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04/30/04-80055-003 150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

E. ALTABA

4/28/04

Date

Daytime Phone # _____