**FILE NOW: FILING FEE AFTER MAY 1 IS $550.00**

PROFIT CORPORATION ANNUAL REPORT **1997**

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

FILED
Feb 18 1997 8:00am
Secretary of State

DOCUMENT # **M27772** **(6)**

1. Corporation Name
**MIAMI DATAMARKET INC.**

Principal Place of Business
~~1390 SOUTH DIXIE HIGHWAY~~
~~SUITE 1209~~
~~CORAL GABLES FL 33146~~

Mailing Address
~~1390 SOUTH DIXIE HIGHWAY~~
~~SUITE 1209~~
~~CORAL GABLES FL 33146-2936~~

3. Date Incorporated or Qualified: 02/24/1986
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21 13323 SW 124 STREET
Suite, Apt. #, etc. 22
City & State 23 MIAMI FLORIDA
Zip 24 33186 Country 25 U.S.A.

2a. Mailing Address
26 13323 SW 124 STREET
Suite, Apt. #, etc. 27
City & State 28 MIAMI FLORIDA
Zip 29 33186 Country 30 U.S.A.

4. FEI Number: 59-2643159 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☑ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $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
IRIZARRI, FERNANDO
~~1390 S. DIXIE HWY, SUITE #1209~~
~~CORAL GABLES FL 33146~~

10. Name and Address of New Registered Agent
81 Name: IRIZARRI, FERNANDO
82 Street Address (P.O. Box Number is Not Acceptable): 13323 SW 124 STREET
83
84 City: MIAMI FL 85 Zip Code: 33186

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: FERNANDO IRIZARRI MANAGER 13 FEB 1997.
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | PDM ☐ DELETE | 1.1 TITLE | PDM ☑ Change ☐ Addition |
| NAME | IRIZARRI, FERNANDO | 1.2 NAME | IRIZARRI, FERNANDO |
| STREET ADDRESS | ~~1390 S DIXIE HWY, SUITE #1209~~ | 1.3 STREET ADDRESS | 13323 S.W. 124 STREET |
| CITY-ST-ZIP | ~~CORAL GABLES FL~~ | 1.4 CITY-ST-ZIP | MIAMI, FL 33186 |
| TITLE | CD ☐ DELETE | 2.1 TITLE | CD ☑ Change ☐ Addition |
| NAME | NUNEZ, LUZ | 2.2 NAME | NUNEZ, LUZ |
| STREET ADDRESS | ~~1390 S. DIXIE HWY., S1209~~ | 2.3 STREET ADDRESS | 13323 S.W. 124 STREET |
| CITY-ST-ZIP | ~~CORAL GABLES FL~~ | 2.4 CITY-ST-ZIP | MIAMI, FL 33186 |
| TITLE | VD ☐ DELETE | 3.1 TITLE | VD ☑ Change ☐ Addition |
| NAME | IRIZARRI, LUZ MARIA | 3.2 NAME | IRIZARRI, LUZ MARIA |
| STREET ADDRESS | ~~AV. ECUADOR 4651~~ | 3.3 STREET ADDRESS | GERTRUDIS ECHENIQUE 394 |
| CITY-ST-ZIP | ~~SANTIAGO, CHILE~~ | 3.4 CITY-ST-ZIP | LAS CONDES, SANTIAGO, CHILE |
| TITLE | ☐ DELETE | 4.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | ☐ DELETE | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | ☐ DELETE | 6.1 TITLE | ☐ Change ☐ Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

CR2E034 (9/96)

14. I do 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 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 REQUIRED~~ FERNANDO IRIZARRI PRESIDENT 13 FEB 97 (305) 235-6236
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0004278