

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

FILED

Jan 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # M40532 (7)
1. Corporation Name
VARADERO BEACH RENTAL & REALTY, INC.

Principal Place of Business Mailing Address
15901 COLLINS AVE 15901 COLLINS AVE
APT 205 APT 205
MIAMI BCH FL 33160 MIAMI BCH FL 33160



DO NOT WRITE IN THIS SPACE

| | | | |
|--------------------------------|---------------------|---------------------|-----------------------|
| 2. Principal Place of Business | | 2a. Mailing Address | |
| 21 | Suite, Apt. #, etc. | 26 | 16711 Collins Ave. |
| 22 | City & State | 27 | # 1106 |
| 23 | Zip | 28 | Sunny Isles Beach, FL |
| 24 | Country | 29 | 33160 |
| 25 | | 30 | U.S.A. |

| | |
|---|--------------------------------|
| 3. Date Incorporated or Qualified | |
| 10/23/1986 | |
| 4. FEI Number | Applied For |
| 59-2729788 | Not Applicable |
| 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| <input checked="" type="checkbox"/> | |
| 6. Election Campaign Financing | \$5.00 May Be Added to Fees |
| Trust Fund Contribution | |
| <input type="checkbox"/> | |
| 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. | |
| <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

| | | | |
|--|--|--|--|
| 9. Name and Address of Current Registered Agent | | 10. Name and Address of New Registered Agent | |
| ARIAS, ARTURO G. 15901 COLLINS AVE APT 205 MIAMI BCH FL 33160 | | 81 Name Arias, Arturo G. 82 Street Address (P.O. Box Number is Not Acceptable) 16711 Collins Ave. 83 # 1106 84 City Sunny Isles Beach, FL 85 Zip Code 33160 | |

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 Arias, Arturo G. DATE 1-16-98
(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|------------------------|---|-----------------------------|
| TITLE | PTD | 1.1 TITLE | PTD |
| NAME | ARIAS, ARTURO G. | 1.2 NAME | Arias, Arturo G. |
| STREET ADDRESS | 15901 COLLINS AVE #205 | 1.3 STREET ADDRESS | 16711 Collins Ave # 1106 |
| CITY-ST-ZIP | MIAMI BCH FL | 1.4 CITY-ST-ZIP | Sunny Isles Beach, FL 33160 |
| TITLE | SVD | 2.1 TITLE | SVD |
| NAME | ARIAS, ELDA | 2.2 NAME | Arias, Elda |
| STREET ADDRESS | 15901 COLLINS AVE #205 | 2.3 STREET ADDRESS | 16711 Collins Ave # 1106 |
| CITY-ST-ZIP | MIAMI BCH FL | 2.4 CITY-ST-ZIP | Sunny Isles Beach, FL 33160 |
| TITLE | | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

14. 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 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: Arias, Arturo G. P.T.D. 1-16-98 (308) 944-4749

CR2E034 (10/97)