Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90029 023 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M60102

A & R LAND HOLDING CO.

Mailing Address Principal Place of Business 7850 SW 82ND COURT 7850 SW 82ND COURT **MIAMI FL 33143 MIAMI FL 33143** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 10/01/1987 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 65-0009218 21 \$8.75 Additional Suite, Apt. #; etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country Country Zip This corporation owes the current year Intangible Zip 30 Personal Property Tax. ☐ Yes 25 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MARRERO, JULIO C. ESQUIRE Street Address (P.O. Box Number is Not Acceptable) 2903 SALZEDO STREE **CORAL GABLES FL 33134** 83

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.

84 City

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition □ DELETE Change 1.1 TITLE PTD TITLE 12 NAME GONZALEZ, RODOLFO NAME 11910 S.W. 191ST TERR. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change 2.1 TITLE TITLE PEREZ, ANA A. 2.2 NAME NAME 2.3 STREET ADDRESS 13555 SW STREET ADDRESS 2.4 CITY-ST-ZIP CITY ST ZIP Addition ☐ Change DELETE 3.1 TITLE TITLE VPS 3.2 NAME NAME ARIAS, ANA M 3.3 STREET ADDRESS STREET ADDRESS 7507 SW 109TH AVENUE MIAM! FL 33173 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE 6.1 TITLE Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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, with all other like empowered.

CR2E034 (11/98)

□No

Zip Code