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AMENDED PROFIT CORPORATION ANNUAL REPORT

1997

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

FILED
97 OCT 30 AM 10:39
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # M80345

1. Corporation Name

ARLA INVESTMENTS CORP.

Principal Place of Business	Mailing Address
2300 Coral Way Miami, Florida 33145 USA	2300 Coral Way Miami, Florida 33145-3511

3. Date Incorporated or Qualified: 05/13/1988
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business — 21: 2300 Coral Way; 22 Suite, Apt. #, etc.: # 200; 23 City & State: Miami, Florida; 24 Zip: 33145; 25 Country: USA

2a. Mailing Address — 26: 2300 Coral Way; 27 Suite, Apt. #, etc.: # 200; 28 City & State: Miami, Florida; 29 Zip: 33145; 30 Country: USA

4. FEI Number: 65-0053221 ☐ 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	10. Name and Address of New Registered Agent
Florida Annual Report Services, Inc. 2300 Coral Way #200 Miami, Florida 33145	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 300002335323--5 -10/31/97--01081--004 84 City *****61.25 FL 85 *****61.25

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: AMADA CANTERA LOPEZ, PRESIDENT — 10/27/97
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 / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PD ARTILES, JORGE 11171 S.W. 60th Terrace Miami, Florida 33173	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	TD ARTILES, RAMON 2503 S.W. 11th Street Miami, Florida 33130	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	VT ARTILES, LAURA 2503 S.W. 11th Street Miami, Florida 33130	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	VPD ARTILES, ELENA 11171 S.W. 60th Terrace Miami, Florida 33173	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	SD ARTILES, JORGE R. 11171 S.W. 60 Terrace Miami, Florida 33173	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

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: X
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
JORGE ARTILES PRESIDENT