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

DOCUMENT # M81643

ISLANDIA INVESTMENTS, INC.

(2)

FILED
Jun 03 1997 8:00am
Secretary of State



Principal Place of Business Mailing Address) (Shiefii tāt taist tinis biiti Bifab 1411 atait atait atait atait atait atait			
3400 OORAL V	VAY	3400 CORAL WAY						
eth floor		6TH FLOOR						
Miami FL 3314 US	9	MIAMI FL 33145-3053 US				T = 5		
				3. Date Incorporated or Qualified 05/16/1988	d 3a. Date of Last Report 08/20/1996			
 -	lace of Business	2a. Mailing Address		4. FEI Number Applied For			oplied For	
21		26		NOT APPLICABLE Not Applicable				
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired Sa.75 Additional Fee Required				
22		27 Ctu 8 Ctuts						
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	28 Zip	Countr					
24	25	29	30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes \(\begin{array}{c}\be			
	9, Name and Address of Curr		130		10. Name and Address of New Registered Agent			
DIA	Z, JORGE ANDRES		81	Name		,		
3400 CORAL WAY			-					
	TE 6 01		82 Street Addr		ress (P.O. Box Number is Not Acceptable)			
MIAMI FL 33145			83					
			-				_,	
4			64	City		FL	65 Zip (Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statu	tes, the abov	re-named cor	poration submits this statement for the p	urpose of	changing it	s registered
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obl.	te of Florida. Such change was loations of, Section 607,0505. F	authorized b lorida Statute	y the corpora	poration submits this statement for the partion's board of directors. I hereby accep	t the app	ointment as	registered
l .	Ť.	gave in all actions are transfer	enca biaibi	•				1
SIGNATURE Signature, typed or printed name of registered agent and life if applicable (NOTE for				ent signature roqu	rred when reinstating)	DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	POWO CONTAC	☐ DELET E	1.5 TITLE	}			☐ Change	Addition
NAME	BOYKO, SONIA C	i E	1.2 NAME					ţ
STREET ADDRESS CITY-ST-7IP MIAMI BEACH FL		סיו	13 STREE	1 ADDRESS				
CITY-ST-ZIP		The state of the s	1.4 CITY-	ST - ZIP				
TITLE	CSD DIAZ, JORGE A	☐ DELETE	2 1 111LE				∐ Change	Addition
NAME	3400 CORAL WAY, STE 601		22 NAME					
STREET ADDRESS	MIAMI FL			T ADDRESS				ł
CITY-ST-ZIP	DELETE DELETE		2. 4 CITY- 3.1 TITLE	\$1 - ZIP			Change	Addition
NAME	VBLEZ, VICTORIA E						CHANGE	C AUDITION
STREET ADDRESS	15541 SW 54TH TERR		3.2 NAME	T ADDRESS				Ī
CITY-ST-ZIP	MIAMI FL	ALM EI			•			ļ
TITLE	V.1.		3.4. CITY- 4.1 TITLE	\$1.4IF			☐ Change	Addition
NAME	MARQUEZ, ANDRES	hand v -v- 16	4, 2 NAME					_
STREET ADDRESS	ASSO COLUMN AVE INIT 44 6			T ADDRESS				
CITY-ST-ZIP	AMANN BEACH EI		4.4 CITY-					
TITLE		DELETE 5.1		V. 611			Change	Addition
NAME		_	5.2 NAME				-	1
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP			5.4 CITY -					
TITLE	☐ DELETE		6.1 TITLE				☐ Change	☐ Addition
NAME			6.2 NAME				•	
STREET ADDRESS				T ADDRESS				
				[

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 eath; 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 appress.

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