

FILE NOW: FILING FEE IS \$61.25

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Mar 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N49790 (1)
 1. Corporation Name
ASOCIACION ARGENTINA DE FLORIDA CENTRAL, INC.

Principal Place of Business 338 TURKEY RUN WINTER PARK FL 32789	Mailing Address P.O. BOX 1149 GOLDENROD FL 32733-1149
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3. Date Incorporated or Qualified 07/06/1992		
4. FEI Number 59-3158386	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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		

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	25
29	30

9. Name and Address of Current Registered Agent BOERO, CARLOS 439 BONIFAY AV ORLANDO FL 32825	10. Name and Address of New Registered Agent 81 Name BOERO CARLOS 82 Street Address (P.O. Box Number is Not Acceptable) 439 BONIFAY AVE 83 84 City ORLANDO FL 85 Zip Code 32825
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE Boero Carlos - TD DATE **3-5-98**

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GIBSON, HAYDEE	1.2 NAME	NO CHANGE
STREET ADDRESS	3314 SANDY SHORE LN	1.3 STREET ADDRESS	
CITY-ST-ZIP	KISSIMMEE FL 34743	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AHUMADA, OSCAR	2.2 NAME	VD MATILDE MEL 8000 KRISTA LYNN CT ORLANDO - FL 32822
STREET ADDRESS	2971 CAYMAN WAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32812	2.4 CITY-ST-ZIP	
TITLE	DD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PINTER JULIO, SANTA	3.2 NAME	NO CHANGE
STREET ADDRESS	1103 BALFOUR DRIVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	DELTONA FL	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOERO, CARLOS	4.2 NAME	NO CHANGE
STREET ADDRESS	439 BONIFAY AV	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32825	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	
TITLE		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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE: **3/5/98 (407)282 2510**

CR2E037 (10/97)