SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 8, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $165 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $305)

NONPROFIT CORPORATION ANNUAL REPORT

1995

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

FILED
95 JUL 14 AM 11:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N93000003945 (3)

1. Corporation Name

ORGANIZACION CULTURAL ARGENTINA DE PALM BEACH IN C.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
~~963 S MILITARY TRAIL~~ ~~WEST PALM BEACH FL 33415~~	~~963 S MILITARY TRAIL~~ ~~WEST PALM BEACH FL 33415~~

3. Date Incorporated or Qualified: 08/27/1993
3a. Date of Last Report: 07/06/1994
4. FEI Number: 65-0432247 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 6245 LAKE WORTH RD. BAY 35 LAKE WORTH FL 33463	26 SAME (AS ON LEFT SIDE)
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — FILING FEE IS $61.25
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
CORPORATE CREATIONS ENTERPRISES INC 4521 PGA BLVD PALM BEACH GARDENS FL 33418	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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 _____ DATE
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	D	11 TITLE	☐ Change ☐ Addition
NAME	~~ZERTUNE, ALBERTO~~	12 NAME	CARLOS FIORE
STREET ADDRESS	~~% 963 S MILITARY TRAIL~~	13 STREET ADDRESS	2944 WERWOOD CT.
CITY-ST-ZIP	~~WEST PALM BEACH FL 33415~~	14 CITY-ST-ZIP	WEST PALM BEACH 33414
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	~~REAL, ALICIA~~	22 NAME	RUTH MOGUILLANSKY
STREET ADDRESS	~~260 GEVILLE ROAD~~	23 STREET ADDRESS	1900 E Village Blvd. Apt. 805
CITY-ST-ZIP	~~WEST PALM BEACH FL~~	24 CITY-ST-ZIP	West Palm Beach, FL 33409
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	ARUJ, ESTRELLA	32 NAME	
STREET ADDRESS	% 963 S MILITARY TRAIL	33 STREET ADDRESS	
CITY-ST-ZIP	WEST PALM BEACH FL 33415	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

CR2E037 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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] 7-10-95 407-967-8567
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0011089