SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25.)

1 of 2

NONPROFIT CORPORATION ANNUAL REPORT

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

FILED
97 APR 11 AM 8:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N 94000004440

1. Corporation Name
PERUVIAN IMAGE CULTURAL GROUP, INC.
GRUPO CULTURAL IMAGEN PERUANA, INC

Principal Place of Business	Mailing Address
8870-3 SW 40th Street Suite 212 Miami, Fl. 33165	8870-3 SW 40th Street Suite 212 Miami, Fl. 33165

3. Date Incorporated or Qualified: 09/06/94
3a. Date of Last Report:

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

4. FEI Number: 65-0520064 ☐ 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

CARLOS MACEDO
8870-3 SW 40th St.
MIami, Fl. 33165

10. Name and Address of New Registered Agent

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 4/3/97
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 NAME STREET ADDRESS CITY-ST-ZIP	MACEDO, GLORIA 11452 SW 42 Street MIami, Fl. 33165 ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition 300002159023--4 -04/29/97--01100--009 ****122.50 ****122.50
TITLE VPD NAME STREET ADDRESS CITY-ST-ZIP	CAMACHO, JAIME ~~3455 SW 99th Ave~~ ~~Miami, Fl. 33165~~ ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☒ Change ☐ Addition 11470 SW 41 Terrace Miami, Fl. 33165
TITLE SD NAME STREET ADDRESS CITY-ST-ZIP	~~MACEDO, MARLENE~~ ~~11452 SW 42 Street~~ ~~Miami, Fl. 33165~~ ☒ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☒ Change ☐ Addition CAMACHO, MARLENE 11470 SW 41 Terrace MIami, Fl. 33165
TITLE PDT NAME STREET ADDRESS CITY-ST-ZIP	MACEDO, CARLOS 11452 SW 42 Street MIami Fl. 33165 ☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition 300002159023--4 -04/29/97--01100--010 *****8.75 *****8.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ 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

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)(k), 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 REQUIRED MACEDO 4-3-97 (305) 553-2229
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Gloria Macedo GLORIA MACEDO

2062

PERUVIAN IMAGE CULTURAL GROUP
GRUPO CULTURAL IMAGEN PERUANA

8870-3 SW 40th ST. MIAMI FL.33165 PH:305/553-2229 * 551-8452 * FAX 553-1622

March 3rd, 1997

Department of State
Division of Corporations
P.O.Box 6327
Tallahassee, Fl. 32314

Gentleman:

In confirmation to our telephone conversation and on behalf of PERUVIAN IMAGE CULTURAL GROUP / GRUPO CULTURAL IMAGEN PERUANA, I am enclosing and application for reinstatement and a check # 2577 for the sum of $122.50, from one of our sponsors: C & S International, to cover for the Nonprofit Corporation Annual Reports years 1996 and 1997.

As we explained in our telephone conversation with one of your representatives We have never received a notice for the year 1996 or this present year, and is in our best interest that all our books and records be up to day.

We appreciated your help in this matter and we thank-you in advance for your understanding. If you have any questions, please do not hesitate to contact us.

Sincerely,

Carlos Macedo
Director
Advisor & P. Relations

Note: Enclosed please find also our check to cover the additional fee to obtain the Certificate of Status.