

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

JUL -7 AM 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000130906

1. Entity Name
NAHUEL LUANA CORP.



Principal Place of Business
1500 SAN REMO AVE SUITE 103
CORAL GABLES, FL 33146

Mailing Address
1500 SAN REMO AVE SUITE 103
CORAL GABLES, FL 33146



2. Principal Place of Business
1390 Brickell Avenue
Suite Apt # etc
Suite 200

3. Mailing Address
1390 Brickell Avenue
Suite Apt # etc
Suite 200

06202005 Chg-P CR2E034 (10/03)

City & State
Miami, FL

City & State
Miami, FL

4. Federal Number
68-0533527

Fee \$100
Total Amount Due \$100

Zip
33131

Country
US

Zip
33131

Country
US

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BARED AND ASSOC., PA
1500 SAN REMO AVE SUITE 103
CORAL GABLES, FL 33146

7. Name and Address of New Registered Agent

Name
Alvaro Castillo B., P.A.

Street Address (P.O. Box Number, if not Applicable)

1390 Brickell Avenue, Suite 200

City Miami, FL Zip Code 33131

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. I am the authorized officer and accept the obligations of registered agent.

SIGNATURE

6-29-05

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME VIVAS, NELSON DAVID
STREET ADDRESS 1500 SAN REMO AVE SUITE 103
CITY STATE ZIP CORAL GABLES, FL 33146

TITLE D
NAME SANTILLI, CYNTHIA
STREET ADDRESS 1500 SAN REMO AVE SUITE 103
CITY STATE ZIP CORAL GABLES, FL 33146

TITLE D
NAME OPEN, MARCELO
STREET ADDRESS 1500 SAN REMO AVE SUITE 103
CITY STATE ZIP CORAL GABLES, FL 33146

TITLE
NAME
STREET ADDRESS
CITY STATE ZIP

TITLE
NAME
STREET ADDRESS
CITY STATE ZIP

TITLE
NAME
STREET ADDRESS
CITY STATE ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME Nelson David Vivas
STREET ADDRESS 1390 Brickell Avenue, Suite 200
CITY STATE ZIP Miami, FL 33131

TITLE D
NAME Cynthia Santilli
STREET ADDRESS 1390 Brickell Avenue, Suite 200
CITY STATE ZIP Miami, FL 33131

TITLE
NAME
STREET ADDRESS
CITY STATE ZIP

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CITY STATE ZIP

TITLE
NAME
STREET ADDRESS
CITY STATE ZIP

12. I hereby certify that the information supplied with this report does not contain any false or misleading information, and that my signature is true and correct. I have the same information as the information required by Chapter 687, Florida Statutes, and that my name appears in Book 10 or Book 11 of the corporation or other public record.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-24-05 (205) 371-5540

VIVAS, NELSON
Santilli, Cynthia