
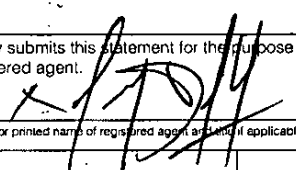
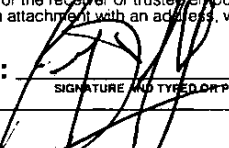


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005 8:00 am
Secretary of State

04-25-2005 90223 041 ***150.00

| | | | | | |
|---|--|---|---|---|--|
| DOCUMENT # P04000108349 1. Entity Name ARGENTINA INTERNATIONAL IV OF MIAMI, INC. | | | |  | |
| Principal Place of Business 9200 S. DADELAND BLVD. SUITE 509 MIAMI, FL 33156 | | | Mailing Address 9200 S. DADELAND BLVD. SUITE 509 MIAMI, FL 33156 | | |
| 2. Principal Place of Business 244 E. FLAGLER ST | | 3. Mailing Address 244 E. FLAGLER ST. | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | |
| City & State Miami FL | | City & State Miami FL | | 4. FEI Number 20-2226536 | |
| Zip 33131 | | Country | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent BRENNER, RICHARD M 9200 S. DADELAND BLVD. SUITE 509 MIAMI, FL 33156 | | 7. Name and Address of New Registered Agent Name LAZARO DOMFROCHT Street Address (P.O. Box Number is Not Acceptable) 3787 PRAIRIE AVE City M. BEACH FL Zip Code 33140 | | | |
| 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 familiar with, and accept the obligations of registered agent. SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE 4/12/05 | | | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LEON, PERLA B 3787 PRAIRIE AVE. MIAMI BEACH, FL 33140 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D DOMFROCHT, LAZARO 3787 PRAIRIE AVE. MIAMI BEACH, FL 33140 | <input type="checkbox"/> Delete | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | | | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Delete | | | |
| 12. 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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | | | | |
| SIGNATURE:  LAZARO DOMFROCHT, PRES. 4/12/05 305-371-8059 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | | | |

2004500



04122005 Chg-P CR2E034 (10/03)

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

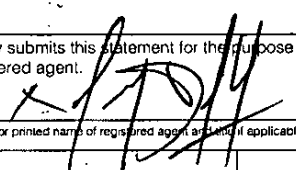
BRENNER, RICHARD M
9200 S. DADELAND BLVD.
SUITE 509
MIAMI, FL 33156

Name **LAZARO DOMFROCHT**

Street Address (P.O. Box Number is Not Acceptable) **3787 PRAIRIE AVE**

City **M. BEACH** **FL** Zip Code **33140**

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SIGNATURE 

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DATE

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After May 1, 2005 Fee will be \$550.00**

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10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LEON, PERLA B
3787 PRAIRIE AVE.
MIAMI BEACH, FL 33140

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DOMFROCHT, LAZARO
3787 PRAIRIE AVE.
MIAMI BEACH, FL 33140

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

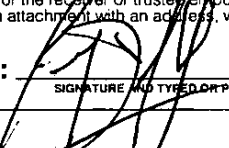
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SIGNATURE:  **LAZARO DOMFROCHT, PRES.** **4/12/05** **305-371-8059**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR