FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAR 30 PM 12:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000027484

1. Corporation Name
PACHA AMERICA CORP

Principal Place of Business / Mailing Address
155 Lincoln Road
Miami Beach, Florida 33139

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 4/14/93
3a. Date of Last Report:

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

4. FEI Number: 65-0464171 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired: XX $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 XX No

9. Name and Address of Current Registered Agent
Angel Gracia
155 Lincoln Road
Miami Beach, Florida 33139

10. Name and Address of New Registered Agent
81 Name: Angel Gracia
82 Street Address (P.O. Box Number is Not Acceptable): 155 Lincoln Road
83
84 City: Miami Beach, FL 85 Zip Code: 33139

11. Pursuant to the Provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Angel Gracia, General Manager DATE: 3/21/95
See also, 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	President	11 TITLE	President ☐ Change ☐ Addition
NAME	Jordi Ricart	12 NAME	Jordi Ricart
STREET ADDRESS	155 Lincoln Road	13 STREET ADDRESS	155 Lincoln Road
CITY-ST-ZIP	Miami Beach, Florida 33139	14 CITY-ST-ZIP	Miami Beach, Florida 33139
TITLE	Vice-President	21 TITLE	Vice-President ☐ Change ☐ Addition
NAME	Ramon Escudero	22 NAME	Ramon Escudero
STREET ADDRESS	155 Lincoln Road	23 STREET ADDRESS	155 Lincoln Road
CITY-ST-ZIP	Miami Beach, Florida 33139	24 CITY-ST-ZIP	Miami Beach, Florida 33139
TITLE	Secretary	31 TITLE	Secretary ☐ Change ☐ Addition
NAME	Xavier Roca	32 NAME	Xavier Roca
STREET ADDRESS	155 Lincoln Road	33 STREET ADDRESS	155 Lincoln Road
CITY-ST-ZIP	Miami Beach, Florida 33139	34 CITY-ST-ZIP	Miami Beach, Florida 33139
TITLE	Treasurer	41 TITLE	Treasurer ☐ Change ☐ Addition
NAME	Xavier Roca	42 NAME	Xavier Roca
STREET ADDRESS	155 Lincoln Road	43 STREET ADDRESS	155 Lincoln Road
CITY-ST-ZIP	Miami Beach, Florida 33139	44 CITY-ST-ZIP	Miami Beach, Florida 33139
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	

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14. I/We 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Xavier Roca 3/21/95 (305) 672-2423
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #