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PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT # P93000027498 (3)
1. Corporation Name

LOS BALCONES, INC.

FILED Mar 25 1996 8:00 am Secretary of State



Principal Place of Business Mailing Address 779 NOTTINGHAM DR 779 NOTTINGHAM DR						I PODIKENI NIO INION NIKIL ORITY DOVIL DANIA DONE KADIK KODIL DIDIO KAJAK IBHIY ADDR				
NAPLES FL 33942 NAPLES FL 33942										
							3. Date Incorporated or Qualified 04/12/1993	3a. Date	of Las	
2. Principal Pla	ace of Business	2a.	Mailing Address				4. FEI Number	1	T	Applied For
21		26					65-0410794			Not Applicable
Suite, Apt. #	#, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired		•	75 Additional ee Required
City & State			City & State				6. Election Campaign Financing			.00 May Be
23		28	•				Trust Fund Contribution			ded to Fees
Zιρ	Country		Ζιρ	Count	ſУ	=	8. This corporation has liability for	intangitile ta	k unde	's 199.032,
24	25	29		30			_ l	□ No		
	9. Name and Address of Curr	ent Regis	tered Agent				10. Name and Address of New F	legistered A	gent	
				8	11	Name				
	REZ, JAIME JR.			8	2	Street Addr	ress (P.O. Box Number is Not Acceptat	ilo)	*	
	ttingham dr				1					
NAPLES	FL 33942			8	3					
				B	14	City			85	Zip Code
							ration submits this statement for the pur	FL		
familiar with SIGNATURE	h, and accept the obligations of, So Signature, typed or printed name of registered ag	ection 607.	.0505, Florida Statute:	S.			rd of directors. Thereby accept the app	C+AT:		
12.	OFFICERS A	ND DIREC		13.		1 .	ADDITIONS/CHANGES TO OFF			
TITLE	D OUTSTONES WHIT OR		☐ DELETE	1 11ITL	E] Chang	ge 🔲 Addition
NAME	GUTIERREZ, JAIME SR			1.2 NAM	IF	ľ				
BANKER INTEREST						ADD DE CO				
STREET ADDRESS	EL RINCON DE CAYAMBE	#18		1.3 STRE	ET A	ADD/RESS				
CITY - ST - ZIP	BOGATA, COLUMBIA	#18	F Dr. Pr	1.4 CITY	-5	Ì			1 0	F71 - 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
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1. I do hereby centry that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.0(3)(k), 10 not statutes. 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 poetiver or trusted 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 or an executive with an address.

SIGNATURE SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECT

3/19/96-941-591218