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 APR 11 PM 2:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000054045 (8)

1. Corporation Name
AVANCES TECNOLOGICOS, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
9130 WILES RD. SUITE 208-S CORAL SPRINGS FL 33067	9130 WILES RD. SUITE 208-S CORAL SPRINGS FL 33067

3. Date Incorporated or Qualified: 08/03/1993
3a. Date of Last Report: 07/26/1994

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

4. FEI Number: 65-0426762 ☐ 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

ZULUAGA, ALVARO
2034 E. OAKLAND PARK BLVD.
FORT LAUDERDALE FL 33306-1107

10. Name and Address of New Registered Agent

81 Name: ALFONSO BARRERA
82 Street Address (P.O. Box Number is Not Acceptable): 9130 Wiles Rd.
83: Suite 208-S
84 City: CORAL SPRINGS FL 85 Zip Code: 33067

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: ALFONSO BARRERA DATE: 02-22-95
(Signature of new 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 17	
TITLE	DP	11 TITLE	☐ Change ☐ Addition
NAME	BARRERA, ALFONSO	12 NAME	
STREET ADDRESS	9130 WILES RD., SUITE 208-S	13 STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33067	14 CITY-ST-ZIP	
TITLE	DS	21 TITLE	☐ Change ☐ Addition
NAME	MONTENEGRO, RODRIGO	22 NAME	
STREET ADDRESS	CALLE 93-A #14-17, OFICINA 710	23 STREET ADDRESS	
CITY-ST-ZIP	SANTA FE DE BOGOTA, COLUMBIA	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
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	

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)(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 above, or on an attachment with an address.

SIGNATURE: ALFONSO BARRERA 02/28/95 (305) 597-40-20.
(Signature and typed or printed name of signing officer or director) (Date) (Daytime Phone #)

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