## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1997

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000024708 (7)

## HIGHLAND INVESTMENTS, INC.

Principal Place of Business Mailing Address 7045 NW 46TH ST 7045 NW 46TH ST MIAMI FL 33136 MIAMI FL 33166-5605 3. Date Incorporated or Qualified 3a. Date of Last Report 03/31/1994 03/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0483809 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Žη Čountry Zip Country 8. This corporation has liability for intangible tax under s. 199.032 X Yes No 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 ZAMORA, ENRIQUE 901 PONCE DE LEON BLVD Street Address (P.O. Box Number is Not Acceptable) **SUITE 502** 83 **CORAL GABLES FL 33134** 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. (NÖT) Registered Agent signature required when reinstating) Signature, typed or prioted name of repetered ago of and the if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DETETE ☐ Change Addition TITLE 1 1 1111 8 RODRIGUEZ, CARLOS NAME 1.2 NAME 7045 NW 46TH ST 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33136 CITY-ST-ZIP 1.4 CITY - ST - ZIP Addition 🔲 DLIETE ☐ Change 2.11018 TITLE DE CESPEDES, EDUARDO 2.2 NAMI NAME 7045 NW 48TH ST STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33136 CITY-ST-ZIP 2. 4 CITY - ST- ZIF DELETE Change Addition TITLE 3.1 101.6 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CHY-S1-7IP CITY - ST - ZIP 🔲 DËLETË ☐ Change Addition 4.1 Tille TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - 7IF CITY - ST - ZIP Change Addition DELETE 5.1 THUE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST- ZIP Change Addition DELETE 6.5 1111.6 TITLE 6.2 NAME NAME

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation op.th? receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name

6.3 STREET ADDRESS

3/10/97

**FILED** 

Mar 14 1997 8:00am

Secretary of State