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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 13 1998 8:00am

Secretary of State

Change

Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000040926 (5)

MIAMI SWAN CORPORATION

Principal Place of Business Mailing Address 25 SE 2 AVENUE 25 SE 2 AVENUE SUITE 201 SUITE 201 DO NOT WRITE IN THIS SPACE MIAMI FL 33131 MIAMI FL 33131 US 3. Date Incorporated or Qualified 06/01/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0503760 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Zip Country Country ZiD 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 Yes 30 25 29 10. Name and Address of New Registered Agent g, Name and Address of Current Registered Agent Name **VEGA, JOSE** 25 SE 2 AVENUE Street Address (P.O. Box Number is Not Acceptable) **SUITE 201** 83 **MIAMI FL 33131** 84 City 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ☐ Change ☐ Addition DELETE TITLE 11 TITLE SORDELLI, CLAUDIO NAME 25 SE 2ND AVENUE #201 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change 2.1 TITLE TITLE **GULLY, ADRIAND** 2.2 NAME NALE 25 SE 2ND AVENUE #201 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE VEGA, JOSE M NAME 3.2 NAME 25 SE 2ND AVE. #201 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME

14. Thereby 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 supplied 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 functive emportered 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:

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CHTY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE