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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000047259 (4) VILLA PENA ONE CORPORATION Principal Place of Business Mailing Address 201 CRANDON BLVD 201 CRANDON BLVD **APT 174 APT 174** KEY BISCAYNE PL 33149 DO NOT WRITE IN THIS SPACE KEY BISCAYNE FL 33149 3. Date Incorporated or Qualified 06/20/1994 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0501976 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zφ Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. Yes □ No 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PENA. CONSTANTINO E Name 201 CRANDON BLVD 82 Street Address (P.O. Box Number is Not Acceptable) **APT 174** 83 **KEY BISCAYNE FL 33149** 84 City 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** (NOTE: Registered Agent signature required when reinstating) Signature, typed or profed name of registered agent and bille if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE ☐ Change Addition PENA, CONSTANTINO E NAME 1.2 NAME 201 CRANDON BLVD APT 174 STREET ADDRESS 1.3 STREET ADDRESS KEY BISCAYNE FL 33149 CITY-ST-ZIP 1.4 CITY - S1 - ZIP DELETE TITI F 2.1 TITLE Change ■ Addition PENA, CARMEN NAME 2.2 NAME 201 CRANDON BLVD APT 174 STREET ADDRESS 2.3 STREET ADDRESS KEY BISCAYNE FL 33149 CITY-ST-ZIP 2.4 CITY-ST-7IP DELETE TITLE 3 1 THILE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change 41 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the corporation or the fective of 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 chapter, or on an attachment with an address.

SIGNATURE: (CONSTRUCTION) TO

CITY-ST-ZIP

Sal98

7-1-261-9772

**FILED** 

Feb 16 1998 8:00am

Secretary of State