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

PROFIT. CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 06, 1999 8:00am **Secretary of State**

1999 02-06-1999 90029 015 ***150.00 DOCUMENT # P94000055612 FDC PUBLISHING CORP. Mailing Address Principal Place of Business 939 CRANDON BOULEVARD 939 CRANDON BOULEVARD KEY BISCAYNE FL 33149 KEY BISCAYNE FL 33149 DO NOT WRITE IN THIS SPACE HS US 3. Date incorporated or Qualifed 07/19/1994 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 65-0509191 Not Applicable 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required . . .----27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 Zip Country 8. This corporation owes the current year Intangible Country Zip Personal Property Tax. 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent DIEZ-CANEDO, FELIPE 939 CRANDON BLVD Street Address (P.O. Box Number is Not Acceptable) **KEY BISCAYNE FL 33149** 83 85 'Zîp Code 84 City 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Change DELETE 1 1055 G 1.1 TITLE TITLE DIEZ-CANEDO RUIZ. FELIPE 1.2 NAME NAME 939 CRANDON BOULEVARD 1.3 STREET ADDRESS STREET ADDRESS **KEY BISCAYNE FL 33149** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change DELETE 2.1 TITLE TITLE 2.2 NAME VIRGILI. FEDERICO NAME 2.3 STREET ADDRESS 2901 DAY AVENUE STREET ADDRESS MIAMI FL 33133 .-2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition [] Change DELETE 3.1 TITLE TITLE NORMAN, MARLA 3.2 NAME NAME ? 1 ALHAMBRA CIRCLE #603 3.3 STREET ADDRESS STREET ADDRES CORAL SPRINGS FL 33134 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition 6.1 TITLE ☐ Change ☐ DELETE TITLE FOR CITEDREE 6.2 NAME

14. I 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 oath; that I am an officer or director of the torporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in dress, with all other like empowered. Block 12 or Block 13

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

KEV BYCLAY

NAME

STREET ADDRESS

CITY-ST-ZIF

RELIPERDIEZ-CANERO