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FILED  
Feb 25 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000057127 (0)

1. Corporation Name

GARBER CORP.

Principal Place of Business

Mailing Address

% 2 S BISCAYNE BLVD  
ONE BISCAYNE TOWER #3400  
MIAMI FL 33131

% 2 S BISCAYNE BLVD  
ONE BISCAYNE TOWER #3400  
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/02/1994

4. FEI Number

65-0512000

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VALDEZ-FAULI CORPORATE SERVICES INC  
2 S BISCAYNE BLVD  
ONE BISCAYNE TOWER SUITE 3400  
MIAMI FL 33131-1897

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 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)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP  
NAME BERUFF, JORGE  
STREET ADDRESS 3423 STONEYBRAE DR  
CITY-ST-ZIP FALLS CHURCH VA ☐ DELETE

1.1 TITLE DP ☒ Change ☐ Addition  
1.2 NAME Beruff, Jorge  
1.3 STREET ADDRESS 2101 Connecticut Ave N.W Apt 44  
1.4 CITY-ST-ZIP Washington D.C. 20008

TITLE DTVP  
NAME BERUFF, DIANA G  
STREET ADDRESS 3423 STONEYBRAE DR  
CITY-ST-ZIP FALLS CHURCH VA ☐ DELETE

2.1 TITLE DTVP ☒ Change ☐ Addition  
2.2 NAME Beruff, Diana G  
2.3 STREET ADDRESS 2101 Connecticut Ave N.W. Apt 44  
2.4 CITY-ST-ZIP Washington D.C. 20008

TITLE S  
NAME VALDES-FAULI, RAUL E  
STREET ADDRESS 2 S. BISCAYNE TRAIL., #3400  
CITY-ST-ZIP MIAMI FL ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 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 if changed, or on an attachment with an address

SIGNATURE:

*Raul E. Valdes-Fauli*

Raul E. Valdes-Fauli

1/27/98

(305) 374-6092

CR2E034 (10/97)