

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

FILED
Apr 09 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 # **P94000057485 (2)**

1. Corporation Name
PROVINCIAL ENTERPRISES, INC.

Principal Place of Business 10700 W. FLAGLER ST. W. FLAGLER PLAZA MIAMI FL 33174 US	Mailing Address 10700 W. FLAGLER ST. W. FLAGLER PLAZA MIAMI FL 33174 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/03/1994

4. FEI Number

65-0518288

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$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

21. Suite, Apt. #, etc.

22. City & State

23. Zip

Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

Country

9. Name and Address of Current Registered Agent

**MORENO, IGNACIO
C/O DON PAN
1700 W. FLAGLER ST.
MIAMI FL 33174**

10. Name and Address of New Registered Agent

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

TITLE	D	<input type="checkbox"/> DELETE
NAME	GORRIN, JUAN	
STREET ADDRESS	8719 COSTA DEL SOL BLVD	
CITY-ST-ZIP	MIAMI FL 33178	

TITLE	D	<input type="checkbox"/> DELETE
NAME	GORRIN, ALVARO	
STREET ADDRESS	8719 COSTA DEL SOL BLVD	
CITY-ST-ZIP	MIAMI FL 33178	

TITLE	D	<input type="checkbox"/> DELETE
NAME	MORENO, IGNACIO	
STREET ADDRESS	7622 SW 129TH PL	
CITY-ST-ZIP	MIAMI FL 33186	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	JUAN GORRIN	
1.3 STREET ADDRESS	105TH NW 51ST	
1.4 CITY-ST-ZIP	MIAMI FL 33178	

2.1 TITLE	E.V.P.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	ALVARO GORRIN	
2.3 STREET ADDRESS	8721 COSTA DEL SOL BLVD	
2.4 CITY-ST-ZIP	MIAMI FL 33178	

3.1 TITLE	SECRETARY / TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	IGNACIO MORENO	
3.3 STREET ADDRESS	7622 SW 129 PL	
3.4 CITY-ST-ZIP	MIAMI FL 33183	

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

[Signature] 2/18/98 (305)2206448

CR2E034 (10/97)