

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mayhew
Secretary of State
DIVISION OF CORPORATIONS

95 MAY 24 PM 12:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000057957 (0)

1. Corporation Name

DVA PRODUCTIONS, INC.

400001500934
-05/30/95--01018--012
*****200.00 *****200.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
C/O JOSE E. SIRVEN 701 BRICKELL AVE., SUITE 3000 MIAMI FL 33131		C/O JOSE E. SIRVEN 701 BRICKELL AVE., SUITE 3000 MIAMI FL 33131	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	3a. Date of Last Report
21. Suite Apt # etc.	26. Suite Apt # etc.	08/05/1994	
22. City & State	27. City & State	4. FEI Number	XXX Applied For Not Applicable
23. Zip	28. Zip	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
24. Country	29. Country	6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
25. Country	30. Country	7. Has corporation been liable for a judgment for under \$ 100,000, Florida Statutes	☐ Yes ☒ No

9. Name and Address of Current Registered Agent	
SIRVEN, JOSE E 701 BRICKELL AVE. SUITE 3000 MIAMI FL 33131	

10. Name and Address of New Registered Agent	
81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
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, not filed if same as agent)

(Signature) (Typed or printed name of registered agent, not filed if same as agent)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE	D	1.1 TITLE	P/D
2. NAME	PIERINI, ALEJANDRO	1.2 NAME	Arellano, Dario Victor
3. STREET ADDRESS	C/O JOSE E. SIRVEN, 701 BRICKELL AVE #3000	1.3 STREET ADDRESS	San Jeronimo 2005 - (3000)
4. CITY, ST, ZIP	MIAMI FL 33131	1.4 CITY, ST, ZIP	Santa Fe, Argentina
5. TITLE		2.1 TITLE	T/S /D
6. NAME		2.2 NAME	Defagot, Esther Noemi
7. STREET ADDRESS		2.3 STREET ADDRESS	San Jeronimo 2005 - (3000)
8. CITY, ST, ZIP		2.4 CITY, ST, ZIP	Santa Fe, Argentina
9. TITLE		3.1 TITLE	
10. NAME		3.2 NAME	
11. STREET ADDRESS		3.3 STREET ADDRESS	
12. CITY, ST, ZIP		3.4 CITY, ST, ZIP	
13. TITLE		4.1 TITLE	
14. NAME		4.2 NAME	
15. STREET ADDRESS		4.3 STREET ADDRESS	
16. CITY, ST, ZIP		4.4 CITY, ST, ZIP	
17. TITLE		5.1 TITLE	
18. NAME		5.2 NAME	
19. STREET ADDRESS		5.3 STREET ADDRESS	
20. CITY, ST, ZIP		5.4 CITY, ST, ZIP	
21. TITLE		6.1 TITLE	
22. NAME		6.2 NAME	
23. STREET ADDRESS		6.3 STREET ADDRESS	
24. CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this filing 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 registered or business office sworn to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1, or Block 1a, of this report, or in an attachment thereto.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF AGING OFFICER OR DIRECTOR