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PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000084121**

1. Corporation Name
CAAP INTERNATIONAL CORPORATION

Principal Place of Business	Mailing Address
5575 NW 74TH AVE MIAMI FL 33166 US	5575 NW 74TH AVE MIAMI FL 33166 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/17/1994

2. Principal Place of Business
21: 5575 NW 74th AVENUE
22: Suite, Apt. #, etc.
23: MIAMI, FL
24: Zip 33166 — 25: Country

2a. Mailing Address
26: SAME AS ABOVE
27: Suite, Apt. #, etc.
28: City & State
29: Zip — 30: Country

4. FEI Number: 65-0534172 — ☐ 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 the current year Intangible Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

RIVERA Y DE PIEROLA , CARMEN Y
8579 NW 54TH STREET
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name: RIVERA Y DE PIEROLA, CARMEN YSELA
82 Street Address (P.O. Box Number is Not Acceptable): 5575 NW 74th AVENUE
83:
84 City: MIAMI — FL — 85 Zip Code: 33166

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPVS	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	RIVERA Y DE PIEROLA , CARMEN Y		1.2 NAME	
STREET ADDRESS	5575 NW 74TH AVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	RIVERA Y DE PIEROLA , ALBERTO		2.2 NAME	
STREET ADDRESS	8600 S.W. 149 AVENUE		2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33193		2.4 CITY-ST-ZIP	
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ 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	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (11/98)

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, with all other like empowered.

SIGNATURE: _____ CARMEN Y. RIVERA Y DE PIEROLA, PRES. 02/02/99 03/24/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #