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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400084159 (0)

VISCAYA DEVELOPING COMPANY

Principal Place of Business Mailing Address ONE GROVE ISLE OR C/O PINE FINANCIAL SERVICES

FILED Apr 28 1997 8:00am Secretary of State



UNIT 1201 MIAMI FL 39133		1001 SOUTH BAYSHORE DR. SUITE 1910 MIAMI FL 33131-4939 US			3	Date Incorporated or Qualified	3a. Date		Report
						11/17/1994	06/19/	1996	
	Place of Business	2a Mailing Address	· oo i	0 50	4	I, FFI Number			pplied For
Suite, Apr	t # ato	26 Pire Fine Suite, Apt. #, etc.		ux	10ce	5 65-0613081			ot Applicable
Suite, Api	(. #, 0 (C.	Suite, Apt. #. etc. 27 1001 Brocell City & State	00.1	0,4	an 5	5. Certificate of Status Desired			Additional
City & Sta	ate	City & State	ruy	14. 1	70				equired
23		28 Miami, FC		6	3. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	7(1)	Counti	· · - · · · · · · · · · · · · · · · · ·		This corporation has liability for			
24]	25	29 33 3	30 /2	SI	}. °		intangibi⊍ tax]Yes []N		3. 199.032,
	g. Name and Address of Curren				i). Name and Address of New Re			
C/(PINE FINANCIAL SERVICES		8	Name					
	01 SOUTH BAYSHORE DRIVE		82	Ctroot A	ddroon ((D.O. Doy Number is Not Assessed	do)		
	ITE 1910			Street Address (P.O. Box Number is Not Acceptable)					
MIA	AMI FL 33131		83	3					
			_	<u> </u>					
			84	1 City			FL	5 Zip	Code
agent. I	it to the provisions of Sections 607 050; registered agent, or both, in the State am familiar with, and accept the obliga	of Florida Such change was a alions of, Section 607.0505, Flo	Julhorized b prida Statute	by the corpces.	pration's	board of directors. Thereby accer	ot the appoint	ment as	registered
SIGNATURE	Signature, typed or printed name of registered ages	nt and title if applicable (NOTE	Registered A	gent signature re	quired who	en reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DI	RECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE					Change	Addition
NAME	DUARTE, MARCIO T		1.2 NAME						
STREET ADDRESS			1.3 STREE	LADDRESS					
CITY-ST-ZIP	MIAMI FL 33133		1.4 CITY -	ST-ZIP					
TITLE	D	DELETE	2 1 1171.E					Change	Addition
NAME	DUARTE, VERA L		2.2 NAME						
STREET ADDRESS	1 GROVE ISLE DR., UNIT 1201		2.3 STREE	1 ADDRESS					
CITY-ST-ZIP	MIAMI FL 33133		2 4 GHY	- \$1 - 7IP					
TITLE		☐ DELFTE	3 - 1111.E					Change	Addition
NAME			3.2 NAME						
STREET ADDRESS	:		3 3 STREE	1 ADDRESS					
CITY-ST-ZIP			3.4. CITY	-ST-7/P					
TITLE		L DELETE	4 1 1111					Change	Addition
NAME			4 2 NAME						
STREET ADDRESS			4.3 STREE	1 ADDRESS					
CITY-ST-ZIP		T Recess	4.4 CHY-	ST - ZIP					
TITLE		L_J DELLITE	5.º TITLE				LJ	Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	I ADDRESS					
CITY-ST-ZIP		The Far	5.4 CITY -	\$1 - 71P					
TITLE		☐ DELETE	6.1 1111 €				LJ	Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			1	1 ADDRESS					
CITY-ST-ZIP	1		6 4 CiTY -	S1-2(P					

14. I do hereby certify that the information supplied with this filing closs 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 eath; 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.