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FILED
Mar 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

DOCUMENT # P94000084774 (6)

1. Corporation Name

CONSORCIO ORIENTAL MIAMI INC.

Principal Place of Business

1594 NW 36 STREET
MIAMI FL 33142
US

Mailing Address

1594 NW 36 STREET
MIAMI FL 33142
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/21/1994

4. FEI Number

65-0538599

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

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

OLIVO, LEONEL
1594 NW 36 STREET
MIAMI FL 33142

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, type or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME LOPEZ, ANA
STREET ADDRESS 8431 FOUNTAINBLEAU BLVD. #206
CITY-ST-ZIP MIAMI FL 33172

TITLE STD ☐ DELETE

NAME OLIVO, LEONEL
STREET ADDRESS 8431 FOUNTAINBLEAU BLVD. #206
CITY-ST-ZIP MIAMI FL 33172

TITLE T ☐ DELETE

NAME LOPEZ, MIRIAM
STREET ADDRESS 8431 FOUNTAINBLEAU BLVD. #206
CITY-ST-ZIP MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME OLIVO, Ana
1.3 STREET ADDRESS 14700 SW 42 WAY
1.4 CITY-ST-ZIP Miami, FL. 33185

2.1 TITLE STD ☒ Change ☐ Addition

2.2 NAME OLIVO, Leonel
2.3 STREET ADDRESS 14700 SW 42 Way
2.4 CITY-ST-ZIP Miami, FL. 33185

3.1 TITLE T ☒ Change ☐ Addition

3.2 NAME ORTIZ, Miriam
3.3 STREET ADDRESS 14700 SW 43 Way
3.4 CITY-ST-ZIP Miami, FL. 33185

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

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 my address.

CR2E034 (10/97)