

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Division of Corporations
200 North Florida Avenue
Tallahassee, Florida 32301-2400
(904) 498-0700

DOCUMENT # **P95000026859 (5)**

1. Corporation Name

ARCOTOUR U.S.A., INC.



Principal Place of Business

% LESLIE ALAN ROZENCWAIG P.A.
2 S. BISCAYNE BLVD. SUITE 9270
MIAMI FL 33131

Mail Address

% LESLIE ALAN ROZENCWAIG P.A.
2 S. BISCAYNE BLVD. SUITE 9270
MIAMI FL 33131

2. Principal Place of Business

21. **1 S.E. 3 AVE**

22. **STE 960**

23. **MIAMI, FL**

24. **33131**

25. **VS**

2a. Mail Address

26. **1 SE 3 AVE**

27. **STE. 960**

28. **MIAMI, FL**

29. **33131**

30. **VS**

9. Name and Address of Current Registered Agent

ROZENCWAIG, LESLIE A P.A.
2 S. BISCAYNE BLVD.
SUITE 9270, 1 BISCAYNE TOWER
MIAMI FL 33131

11. Pursuant to the provisions of Section 190.01, Florida Statutes, the undersigned hereby certifies that the foregoing is a true and correct statement for the purpose of changing the registered office of the corporation as shown on the Statement of Registered Office. The undersigned hereby certifies that the foregoing is a true and correct statement for the purpose of changing the registered office of the corporation as shown on the Statement of Registered Office.

SIGNATURE

Leslie Alan Rozencwaig

1/26/96

12. OFFICERS AND DIRECTORS

NAME ☐ Change ☐ Addition

STREET ADDRESS ☐ Change ☐ Addition

CITY, STATE ☐ Change ☐ Addition

ZIP ☐ Change ☐ Addition

NAME ☐ Change ☐ Addition

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ZIP ☐ Change ☐ Addition

NAME ☐ Change ☐ Addition

STREET ADDRESS ☐ Change ☐ Addition

CITY, STATE ☐ Change ☐ Addition

ZIP ☐ Change ☐ Addition

81. Name

LESLIE ALAN ROZENCWAIG, ESQ.

82. Street Address (If Not Applicable)

1 SE. 3RD AVE.

83. City

MIAMI

84. State

FL

85. Zip Code

33131

10. Name and Address of New Registered Agent

81. Name

82. Street Address (If Not Applicable)

83. City

84. State

85. Zip Code

11. Pursuant to the provisions of Section 190.01, Florida Statutes, the undersigned hereby certifies that the foregoing is a true and correct statement for the purpose of changing the registered office of the corporation as shown on the Statement of Registered Office. The undersigned hereby certifies that the foregoing is a true and correct statement for the purpose of changing the registered office of the corporation as shown on the Statement of Registered Office.

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ZIP ☐ Change ☐ Addition

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CITY, STATE ☐ Change ☐ Addition

ZIP ☐ Change ☐ Addition

ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12
☐ Change ☒ Addition
PLS/IT/D
FLAVIO COELHO
40 LESLIE ALAN ROZENCWAIG, PA
1 SE 3 AVE., STE 960, MIA, FL 33131
☐ Change ☐ Addition

000001762080
-03/29/96--01015--032
***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Flavio Coelho
President

3/25/96

CR2E034 (12/95)

3-28-1996