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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000038507 (6)

Country

g. Name and Address of Current Registered Agent

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RIVERO, LUIS J ESQ. 299 ALHAMBRA CIRCLE

CORAL GABLES FL 33134

SUITE 401

JUAN CARLOS, INC.

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Ζφ

City & State

Principal Place of Business	Mailing Address	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/15/1995		
2105 PONCE DE LEON BOULEVARD CORAL GABLES FL 33134 US	2105 PONCE DE LEON BOULEVARD CORAL GABLES FL 33134 US			
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For		
21	26	65-0584835 Not Applica		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	\$8.75 Additional		

City & State

28

29

5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution This corporation owes or has paid the current year Intangible X Yes ☐ No Personal Property Tax due June 30. 10. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable)

FILED

Mar 11 1998 8:00am

Secretary of State

Country

81

83

84 City

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office or re	to the provisions of Soctions 607.0502 and 607.1508 egistered agent, or both, in the State of Florida. Suc m familiar with, and accept the obligations of, Section	h change was aut	horized by the con	corporation submits this statement for the pi poration's board of directors. I hereby accep	rpose of changing its title appointment as r	registered registered
SIGNATURE	Signature, typod or product name of registered agent and title if applica-	blo (NOTE: F	Registered Agent signature	required when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS	S IN 12
TITLE	PD	DELETE	1.1 TITLE		Change	Addition
NAME	TEJERA, JOAN CARLOS		1.2 NAME			
STREET ADDRESS	2711 SOUTH WEST 17TH AVENUE		1.3 STREET ADDRESS			
CITY-ST-ZIP	COCONUT GROVE FL 33133		1.4 CITY - ST - ZIP	,		
TITLE	D	DELETE	21 TITLE	VIT	Change	Addition
NAME	TEJERA, NERY MARKA MARIA		2.2 NAME	NERY MARIA Teje	RA	
STREET ADDRESS	2711 SOUTH WEST 17TH AVENUE		2.3 STREET ADDRESS	SANE		
CITY-ST-ZIP	COCONUT GROVE FL 33133		2 4 CITY-ST-ZIP	SAME		
TITLE		DELETE	31 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CATY-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			53 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 ADORESS			
CITY ST. 210			GAICHTY-CT. 7/D			

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 logal effect as if made under oath; that I am an officer or director of the corporation or the receiver or frusted compowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter or or an alternative with an address.

Nery MARIA TEJERA

CR2E034 (10/97)

Applied For Not Applicable

Zip Code