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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000039587 (7)

BERENGUER CONSULTING, INC.

Principal Place of Business Mailing Address 2801 PONCE DE LEON BLVD. 2801 PONCE DE LEON BLVD. SUITE 270 SUITE 270 CORAL GABLES FL 33134 CORAL GABLES FL 33134

FILED Jan 21 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 05/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0597443 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year intangible 24 25 29 ☐ Yes 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BERENGUER, JOSE M III 2801 PONCE DE LEON BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 270** 83 CORAL GABLES FL 33134 84 City Zip Code FI 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change BERENGUER, JOSE M. CR2E034 NAME 12 NAME 1111 CRANDON BLVD., APT. C-501 STREET ADDRESS 1.3 STREET ADDRESS KEY BISCAYNE FL CITY - ST - ZIP 1.4 CITY - ST - ZIP Addition TITLE DELETE 2.1 TITLE Change BERENGUER, MARTA P NAME 2.2 NAME 1111 CRANDON BLVD, APT, C-501 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST~ZIP DELETE Change ☐ Addition TITLE BERENGUER, JOSE M III NAME 3.2 NAME 7740 S.W. 70 ST. STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE BERENGUER, ANA M NAME 4. 2 NAME 7740 SW 70 ST 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5 4 CITY-ST-ZIP CITY - ST - ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 of 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 the receiver mit with an address.

6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY - ST- ZIP