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 # P95000047485 (4)

FILED Feb 19 1998 8:00am Secretary of State

COMILLAS LAND, INC.								
0011111						I JERNIADI (JE JEJRI ENIN ERIN ARIKLORIN GRIN GRIN GRIN	el addie daar	DI 18181 BINI ID DI
							(TI (818) BIII (88)
Principal Plac	e of Business	Mailing Address				F saminaur 118 fürbt areir abilt Adiet büttt üblit 840	n indil Alai	81 (8)8) 8 11 (8)
9688 S.W. 24TH \$T. 9688 S.W. 24TH \$T.								
MIAMI FL 33165 MIAMI FL 33165				•		DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	0,7.01	
						06/19/1995		
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				65-0595531		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		5 Additional
City & Stat		City & State						e Required
— ·	ө	City & State				6. Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip	Country	28	Cour	ntrv		This corporation owes or has paid the cu		
24	25	<u>├</u> ~ `	30				Yes	□ No
	9. Name and Address of Curre					10. Name and Address of New Registered	Agent	
MA	ARQUEZ, JOSE M			81	Name			
78	2 NW LEJEUNE ROAD		į,	82	Street Addres	ss (P.O. Box Number is Not Acceptable)	~	
SU	ITE 548		L					
MI	AMI FL 33126			83				
			ļī	84	City		85 2	Zip Code
44 5	10 No. 10 10 10 10 10 10 10 10 10 10 10 10 10	100 C07 4500 Florida Otto				FL		
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 regist 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 registed.								ig its registered t as registered
agent. La	im familiar with, and accept the obti	gations of, Section 607.0505, Flori	ida Statu	utes.	•			
SIGNATURE	Signature, typod or printed name of registered as	grot and title if applicable (NOTE:	Registered	Agen	nt signature required	when reinstating) DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	DIRECT	TORS IN 12
TITLE	D	DELETE	1.1 TITLE				Chan	ge Addition
NAME	HERRAN, MANUEL A		1.2 NAM	ME ·				
STREET ADDRESS	8460 S.W. 5TH ST.		1.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP	MIAMI FL 33144	D DOLLTE	1.4 CIT		- ZiP	<u> </u>		Part and a second
TITLE	S NALDES DANIELD	DELETE	2.1 TITLE 2.2 NAME		ļ		☐ Chan	ge [] Addition
NAME	VALDES, DANIEL R 9755 S.W. 62 ST.		2.3 STREET		ADDOCCO			
STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33173		2.4 CITY-S		- 1			
TITLE	WILCOM LE COTTO	DELETE	3.1 TITLE		5-215		☐ Chan	pe Addition
NAME			3.2 NAM					- -
STREET ADDRESS			3.3 STR	REET A	ADDRESS			
CITY-ST-ZIP			3.4. CIT	Y - ST	r- ZIP			
TITLE	-	☐ DEL et e	4.1 TITU	.£			Chan	ge Addition
NAME			4. 2 NA		Į			
STREET ADDRESS	•		1		ADDRESS			
CITY-ST-ZIP		Delete	4.4 CIT		- ZIP		Chan	no Taddition
TITLE		☐ DEL ET E	5.1 TITL		1		☐ Chan	ge L Addition
NAME STREET ADDRESS			5.2 NAN		UNODECC			
					ADORESS 21P			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY 6.1 TITL		- 411		Chan	ge Addition
NAME			6.2 NAN					
STREET ADDRESS			1		ADDRESS			
CITY-ST-ZIP			6.4 C(T)					
	certify that the information supplied	with this filing does not qualify for				ection 119.07(3)(i), Florida Statutes, I further co	rtify 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 or an attachment with an address.

SIGNATURE

Jaeder DANIEL R. WAIdes

19/98 221-8851