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

Mailing Address

PALM BEACH FL 33480

251 ROYAL PALM WAY, SIXTH FLOOR

MENDOZA. CALLAS & SCHILLING

PROFIT CORPORATION ANNUAL REPORT



MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NATURE:

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

Secretary of State 02-20-1999 90167 006 ***150.00

FILED

Feb 20, 1999 8:00 am

(561) 659-1111

1999

Principal Place of Business

LM BEACH FL 33480

DOCUMENT # P95000050474

MATILDE HOLDINGS, INC.

1 ROYAL PALM WAY, SIXTH FLOOR

ENDOZA. CALLAS & SCHILLING

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed <u>06/23/1995</u> Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 <u>65-0747550</u> Suite, Apt. #, etc. Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 City & State Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Zip Added to Fees Country Country 8. This corporation owes the current year intangible 25 29 |30| Personal Property Tax. 9. Name and Address of Current Registered Agent X Yes □No 10. Name and Address of New Registered Agent 81 DE MENDOZA, MARIO G III 251 ROYAL PALM WAY, SIXTH FLOOR Street Address (P.O. Box Number is Not Acceptable) PALM BEACH FL 33480 83 84 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 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE 1.1 TM F Addition SENIOR, RAUL 1.2 NAME 251 ROYAL PALM WAY, SIXTH FLOOR FT ADDRESS CR2E034 1.3 STREET ADDRESS PALM BEACH FL 33480 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change SENIOR MENDOZA, MATILDE G ☐ Addition 2.2 NAME ET ADDRESS 251 ROYAL PALM WAY, SIXTH FLOOR 2.3 STREET ADDRESS PALM BEACH FL 33480 ST-ZIP 2. 4 CITY-ST-ZIP ☐ DELETE 3.1 TITLE ☐ Change ☐ Addition 3.2 NAME ET ADDRESS 3.3 STREET ADDRESS ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE 4.1 TITLE ☐ Change Addition 4. 2 NAME TADDRESS 4.3 STREET ADDRESS T-ZIP 4.4 CITY-ST-ZIP ☐ DELETE 5.1 Titl F Addition 5.2 NAME TADDRESS 5.3 STREET ADDRESS T-ZIP 5.4 CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 6.2 NAME ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 lock 12 or Block 13 if changed, oxfort an attachment with an address, with all other like empowered.

URE R Raul Senior, Pres.