## 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 # P95000063097 (6)

FATOR DEVELOPMENT CORP.

Mailing Address

% MR. CLAUDIO STIVELMAN

Principal Place of Business

% MR. CLAUDIO STIVELMAN TWO S. BISCAYNE BLVD., SUITE 2980

FILED Apr 17 1998 8:00am Secretary of State



TWO S. BISCAYNE BLVD., SUITE 2980 DO NOT WRITE IN THIS SPACE MIAMI FL 33131 MIAMI FL 33131 3. Date Incorporated or Qualified <u>08/15/1995</u> 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65:0609791 Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Ζıρ Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 30 26 29 Name and Address of New Registered Agent g. Name and Address of Current Registered Agent Name LEHMAN, RICHARD S ESQ. 2600 N. MILITARY TRAIL Street Address (P.O. Box Number is Not Acceptable) **SUITE 270** 83 **BOCA RATON FL 33134** Zip Code 64 City 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE. Signature, typed or pivited name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition TITLE 1 1 TITLE RODRIGUES, FERNANDO A. T SR. 1.2 NAME NAME % TWO S. BISCAYNE BLVD., SUITE 2980 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33131 1.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE TITLE STD 2.1 TITLE NETO, VASCO R 2.2 NAME NAME % TWO S. BISCAYNE BLVD., SUITE 2980 2.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33131** 2.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition | TITLE 3.1 TITLE RODRIGUES, FERNANDO A. T JR. 3.2 NAME NAME % TWO S. BISCAYNE BLVD., SUITE 2980 3.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33131** CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CHTY-ST-ZIP Addition DELETE Channe 5.1 TITLE THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP \_\_\_ Addition Change DELETE 6.1 TITLE TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

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 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 on an attachment with an address