

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

AMENDED ANNUAL REPORT

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000069587

1. Corporation Name

AVILAR, INC.

Principal Place of Business

3322 NE 33rd St.
Ft. Lauderdale, FL 33308

Mailing Address

3322 NE 33rd St.
Ft. Lauderdale, FL 33308

2. Principal Place of Business

21. 2805 E. Oakland Park Blvd.

2a. Mailing Address

2a. P.O. Box 6217

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. 389

27.

City & State

City & State

23. Ft. Lauderdale, FL

23. Ft. Lauderdale, FL

Zip

Country

Zip

Country

24. 33306

25. USA

29. 33310-6217

30.

USA

9. Name and Address of Current Registered Agent

D'AVILA, FERNANDO
9167 RAMBLEWOOD DR.
APT. 416
CORAL SPRINGS, FL. 33071-7062

3. Date Incorporated or Qualified

9/8/95

4. FEI Number

65-06-15247

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

7. This corporation owes the current year Intangible

Personal Property Tax.

☒ Yes

☐ No

10. Name and Address of New Registered Agent

81. Name

SAME

82. Street Address (P.O. Box Number is Not Acceptable)

2805 E. Oakland park Blvd.

83.

Suite 389

84.

City

Ft. Lauderdale

FL

85.

Zip Code

33306

11. Pursuant to the provisions of Sections 607.0502 and 607.1606, 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 printed name of registered agent and title is applicable)

(Signature, typed or printed name of registered agent and title is applicable)

DATE

12. OFFICERS AND DIRECTORS

1. TITLE D7
2. NAME D'Avila, Fernando
3. STREET ADDRESS 2805 E. Oakland Park Blvd, Suite 389
4. CITY-ST-ZIP Ft. Lauderdale, FL 33306

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY-ST-ZIP

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-ST-ZIP

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-ST-ZIP

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY-ST-ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE D1P7S
2. NAME D'Avila, Fernando
3. STREET ADDRESS 2805 E. oakland park Blvd Suite 389
4. CITY-ST-ZIP Ft. Lauderdale, FL 33306

5. TITLE VP/T
6. NAME Paulo Gil Moreira Ferreira
7. STREET ADDRESS 37 Fort Royal Isle
8. CITY-ST-ZIP Ft. Lauderdale, FL 33308

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY-ST-ZIP

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY-ST-ZIP

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY-ST-ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FERNANDO D'AVILA PRESIDENT 09/29/99 (954) 684-6164

FILED

99 OCT -4 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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