

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

FILED

May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000071554 (6)**

1. Corporation Name
PACHAMAMA, INC.



Principal Place of Business 13499 BISCAYNE BLVD. #1407 NORTH MIAMI FL 33181	Mailing Address 13499 BISCAYNE BLVD. #1407 NORTH MIAMI FL 33181-2030
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3. Date Incorporated or Qualified 09/13/1995	3a. Date of Last Report 05/01/1996
4. FET Number 65-0610559	Applied for Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

**VALLE, DANITZA P
13499 BISCAYNE BLVD. #1407
NORTH MIAMI FL 33181**

10. Name and Address of New Registered Agent

81 Name **PENALOZA, DANITZA**
82 Street Address (P.O. Box Number is Not Acceptable)
13499 BISCAYNE BLVD. # 1407
83
84 City **NORTH MIAMI** FL 85 Zip Code **33181**

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 printed name of registered agent or owner, if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☒ DELETE
NAME	VALLE, DANITZA P	
STREET ADDRESS	13499 BISCAYNE BLVD. #1407	
CITY-ST-ZIP	NORTH MIAMI FL 33181	
TITLE	S	☒ DELETE
NAME	VALLE, DANITZA P	
STREET ADDRESS	13499 BISCAYNE BLVD. #1407	
CITY-ST-ZIP	NORTH MIAMI FL 33181	
TITLE	T	☒ DELETE
NAME	VALLE, DANITZA P	
STREET ADDRESS	13499 BISCAYNE BLVD. #1407	
CITY-ST-ZIP	NORTH MIAMI FL 33181	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☒ Change ☐ Addition
1.2 NAME	PENALOZA, DANITZA	
1.3 STREET ADDRESS	13499 BISCAYNE BLVD. # 1407	
1.4 CITY-ST-ZIP	NORTH MIAMI FL 33181	
2.1 TITLE	S	☒ Change ☐ Addition
2.2 NAME	PENALOZA, DANITZA	
2.3 STREET ADDRESS	13499 BISCAYNE BLVD. # 1407	
2.4 CITY-ST-ZIP	NORTH MIAMI FL 33181	
3.1 TITLE	T	☒ Change ☐ Addition
3.2 NAME	PENALOZA, DANITZA	
3.3 STREET ADDRESS	13499 BISCAYNE BLVD. # 1407	
3.4 CITY-ST-ZIP	NORTH MIAMI FL 33181	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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.

SIGNATURE:

Penaloza

5/1/97 (305) 919-9122

CR2E034 (9/96)