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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9500090348

1. Corporation Name

VILLA MADRID HOLDINGS INC.

Principal Place of Business Mailing Address						i iddishut iid ididi ditit maits aarsi aa	ill Maila i	ital <b>Albillik</b> s		All IMBS	
1790 N.W. 82 AVENUE MIAMI FL 33126		1790 N.W. 82 AVENUE Miami Fl 33126			DO NOT WRITE IN THIS SPACE						
						3. Date Incorporated or Qualifed					
					}	11/28/1995				}	
* 5 · · · · · · · · · · · · ·	of During	2a. Mailing Address				4. FEI Number			Applied I	For	
2. Principal Pl	<del></del>	lalling Address					Not Applicable				
21		26 Suite And # ata			65-0712218		\$8.75 Additional				
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	<u> </u>	Fee Required			
City & State City & State						6. Election Campaign Financing	1	\$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees					
Zip	Country	Zip	Country	7		8. This corporation owes the current year Intangible					
24	25 29 30			Personal Property Tax. ☐ Yes ☐ No							
9. Name and Address of Current Registered Agent						gent					
			81	N.	ame						
FERRANDO, DOLORES				S	treet Addres	ss (P.O. Box Number is Not Acceptable)					
1540 MERCADO AVENUE CORAL GABLES FL 33146			83								
COR	AL GADLES PL 33140		83	1							
			84	C	ity		FL	85 Z	ip Code		
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 and title if applicable. (NOTE. Registered Agent signature required when reinstating)  DATE											
12.	2. OFFICERS AND DIRECTORS 1:					ADDITIONS/CHANGES TO OFFICE	RS AND	DIREC	TORS IN	12	
TITLE	P DELETE 1.1 T		1.1 TITLE					Chang	je 🗆	Addition	
NAME	ALVEAR, JORGE I		1.2 NAME							1	
STREET ADDRESS	1790 N.W. 82ND AVE.		1.3 STREET ADDRESS		DRESS						
44444 21			1.4 CITY-ST-ZIP		ŀ						
CITY-ST-ZIP				2.1 TITLE				Chang	je 🗆	Addition	
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NAME											
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NAME	4.2		4. 2 NAME	4. 2 NAME							
STREET ADDRESS	TREET ADDRESS		4.3 STREET ADDRESS		DRESS						
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		4.4 CITY-5	CITY-ST-ZIP							
		☐ DELETE	5.1 TITLE					Chang	ge 🗀	Addition	
NAME			5.2 NAME							ì	
STREET ADDRESS			5.3 STREE	TADO	RESS						
			5.4 CITY-5	CITY-ST-ZIP							
3171-33-2IF		Decem	61 TITLE		-			C1 Chang	٦۵ ٦	Addition	

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 tructee 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.

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

04/25/99

(305) 593 8513

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90066 020 \*\*\*150.00

CR2E034 (11/98)