

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

**FILED**  
**Sep 07, 1999 8:00 am**  
**Secretary of State**

09-07-1999 90003 027 \*\*\*550.00

DOCUMENT # **P96000007544**

Corporation Name

**HOCKEY CLUB ARGENTINO INC.**

Principal Place of Business

**OCEAN DRIVE  
MIAMI BEACH FL 33139**

Mailing Address

**350 OCEAN DRIVE  
MIAMI BEACH FL 33139**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**01/24/1996**

4. FEI Number

**05-1953957 65-0641729**

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 owes the current year  
Intangible Personal Property. ☐ Yes ☐ No

Principal Place of Business

**1653 WASHINGTON AVE**

2a. Mailing Address

**1653 WASHINGTON AVE**

Suite, Apt. #, etc.

**MIAMI BEACH**

Suite, Apt. #, etc.

**MIAMI BEACH**

City & State

**MIAMI BEACH**

City & State

**MIAMI BEACH**

Zip

**33139**

Country

**DADE**

Zip

**33139**

Country

**DADE**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ARANCIBIA, JULIO A**

**7225 SW 132 ST**

**MIAMI FL 33183**

**13670 SW 80th Street  
MIAMI, FLORIDA 33183**

81 Name

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

83

84 City

**FL**

85 Zip Code

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

**8/16/99**

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

PD ☐ DELETE

**ARANCIBIA, JULIO A**

**7225 SW 132 ST**

**MIAMI FL**

13.

1.1 TITLE

**ARANCIBIA, JULIO A**

☒ Change ☐ Addition

1.2 NAME

**13670 SW 80th STREET**

1.3 STREET ADDRESS

**MIAMI, FL 33183**

1.4 CITY-ST-ZIP

2.1 TITLE

**ARANCIBIA, DOMINGA J.**

☒ Change ☐ Addition

2.2 NAME

**13670 SW 80th Street**

2.3 STREET ADDRESS

**MIAMI, FLORIDA 33183**

2.4 CITY-ST-ZIP

3.1 TITLE

**ARANCIBIA, JAVIER**

☒ Change ☐ Addition

3.2 NAME

**13670 SW 80th Street**

3.3 STREET ADDRESS

**MIAMI, FLORIDA 33183**

3.4 CITY-ST-ZIP

4.1 TITLE

**ARANCIBIA, GUSTAVO**

☒ Change ☐ Addition

4.2 NAME

**13670 SW 80th Street**

4.3 STREET ADDRESS

**MIAMI, FLORIDA 33183**

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

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.

SIGNATURE:

**ARANCIBIA, DOMINGA J. PRESIDENT**

**8/16/99**

**(305) 965-7725**

CR2E034 (5/99)