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

Mailing Address

5780 S.W. 117TH ST. MIAMI FL 33156-5006

PROFIT CORPORATION annual report

1997

Principal Place of Business

5760 S.W. 117TH ST.

MIAMI FL 33156

NAME STREET ADDRESS

City+S1-2iP

SIGNATURE:

appears in Block 12 or Block 13 if changed, or on an attache



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

AN11597 305 6650790

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000021384 (8)

ARCOS MARKETING CONSULTANT CORP.

3. Date Incorporated or Qualified 3a. Date of Last Report 03/06/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For PO BOX 561152 15611/2 SVNSET DK 6T-062TO Not Applicable Suite, Apt. #, etc. \$8.75 Additional \Box Certificate of Status Desired. Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be MAH CORAL GABLES 28 Trust Fund Contribution Added to Fees Country V5A Florida Statutes 29 30256 -1152 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ROTATI ROTATI, SERGIO CLAVDIO 5760 S.W. 117TH ST. Street Address (P.O. Box Number is Not Acceptable)
4795 NORTH KENDALL **MIAMI FL 33156** В3 84 City 33156 niani 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 307.0505, Florida Statutes. April 15 97 (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 PSTD DELETE PSTA Change Addition FILE 11 TITLE ROTATI CLAUDIO ROTATI, SERGIO 1.2 NAME NAME 4795 NORTH KENDALL DRIVE 5760 S.W. 117TH ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33158 33156 CITY-51-2d 1.4 City - St - ZiP Addition DELETE Change LILE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STHEET ADDRESS 2. 4 CITY - ST- ZIP C:1 r - 5" - 71P DELETE Change 3.1 TITLE Addition THEF NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP C-TY - S1 - ZIP DELETE Change Addition 4.1 TITLE TITLE NAV: 4.2 NAME 4.3 STREET ADORESS STREET ADDRESS 4.4 CITY+ST-ZIP CITY (\$4 - 78) DELETE Change Addition HH 5.1 TITLE 52 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 54 DITY-ST-ZIP City 51-2-2 DELETE Change Addition 61 TITLE TILE

6.2 NAME

SIGNING OFFICER OR DIRECTOR

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. Too 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 eath; 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