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

PROSE ELORIDA DEPARTMENT DE STATÉ CORPORATION Sandra B. Mortham **ANNUAL REPORT** FILED Secretary of State DIVISION OF CORPORATIONS 1998 98 MAY -1 PM 12: 05 DOCUMENT # P96000023160 (0) TALLAHASSEE, FLORIDA SANTA MARTA, INC. Principal Place of Business Mailing Address 10806 SW 72 STREET #103 468 S.W. 26TH RD. MIAMI FL 33179 MIAMI FL 33129 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 03/08/1996 2. Principal Place of Business 2a. Mailing Address FEI Numbe Applied For 468 SW 2674 RO. Suite, Apr #, etc. RIVO. 26 2005 Biscorne NOT APPLICABLE Not Applicable Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired 400O Fee Required City & State MIAM City & State \$5.00 May Be Election Campaign Financing Micani 23 Just Fund Contribution Added to Fees Country his corporation owes or has paid the current year Intangible 3313 Personal Property Tax due June 30. Yes 29 30 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MENOCAL, CRISTINA N DRES HEROCAL 10806 SW 72 STREET #103 Street Address (P.O. Box Number is Not Acceptable) R2 **MIAMI FL 33173** CONTRACTOR OF 83 RΔ City 85 Zip 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typicid or pointed native of registered agent and title it applicable (NOTE: Registered Agent signature required when roinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change THLE 11 TITLE 5480 MENOCAL, MARIO G 12 NAME NAME -05/07/98--01076--021 10806 SW 72 STREET #103 STREET ADDRESS 13 STREET ADDRESS ****150.00 ****150.00 MIAMI FL 33173 CITY-ST-ZIP 14 CITY-ST-ZIP □ DELETE Change Addition TITLE 21 TITLE MENOCAL, PEDRO G NAME 22 NAME 1560 SAN RAFAEL AVENUE STREET ADDRESS 2.3 STREET ADDRESS **CORAL GABLES FL 33134** CITY-ST-ZIP 2 4 C(TY-ST-7)P DELETE Change Addition TITLE 3 1 TITLE FERNANDEZ, CONSUELO NAME 3.2 NAME STREET ADDRESS 1560 SAN RAFAEL AVENUE 3.3 STREET ADDRESS CORAL GABLES FL 33134 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE DILECTOR Change Addition TITLE 4.1 TITLE PEDRO G. MENOCAL, JR NAME 4. 2 NAME closteer, HBCTOR, & DAVIS, LLP. / 2005. Biscopne Blad. STREET ADDRESS 4.3 STREET ADDRESS iani, FL 33131 CITY-ST-ZIP 4.4 City-St-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5 2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - 7IP DELETE TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-7IP valion surplied with this filing does not qualify or it or suppliemental annual report is true and acco tration of the receiver or trustee empowered to e or the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information create and that my signature shall have the same legal effect as if made under oath; that I am an effective this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the infon-indicated on this annual/repo Block 12 or Block 13 if d ed, or or an attachment with an address 3/30/98

571-7000