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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 16 1997 8:00am Secretary of State

1997 Division of Control of Contr								
DOCU 1. Corporatio GAUCHO		00023324 (2)) 12341005 100 10160 11110 11114 11116 1	N BB IN a 41888 NA B 8 NAB8	BIN BNON 1901)	
China ina Dua	on of D masses	Mailing Address	··					
,								
2400 STAPLES AVENUE 2400 STAPLES AVENUE KEY WEST FL 33040 KEY WEST FL 33040-3822			2		İ			
					3. Date Incorporated or Qualified	3a. Date of Last	Report	
					03/11/1996			
7.01 ·	Place of Business	2a. Mailing Address			4. FEI Number	·	Applied For	
21 Suite, Apt.	# ek:	Suite, Apt. #, etc.	·		65.006335		Not Applicable Additional	
22		├ ──			5. Certificate of Status Desired		Required	
City & State		City & State	*****		6. Election Campaign Financing	\$5.0	O May Be	
23	1 6-	28	1 2		Trust Fund Contribution		d to Fees	
Ζ φ 24	Country 25	Zip (29)	Countr 30	У	This corporation has liability for Florida Statutes	intangible tax under ☑ Yes ☑ No	s. 199.032,	
=======================================	9. Name and Address of C	v	1001		10. Name and Address of New Re			
DEJ	ONG, MARK		81	Name				
2400 STAPLES AVENUE KEY WEST FL 33040			82	Street Add	iress (P.O. Box Number is Not Accepta	ble)		
			83	<u> </u>			·	
			100					
			84	City		FL 85 Zi	p Code	
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.1508, Florida State	ites, the abov	e-named corp	poration submits this statement for the		its registered	
agest 1 a	registered agent, or noth, in the ru familiar with, and accept the	State of Florida. Such change was obligations of, Section 607.0505, F	authonzed b Torida Statute	y the corpora s.	poration submits this statement for the tion's board of directors. I hereby acce	pt the appointment a	is registered	
SIGNATURE						1/2: 5		
12.		ed agent and title it applicable. (NO S AND DIRECTORS	TE: Megistered Ag	ent signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE	1DQ IN 10	
THE	D	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFI	Change		
NAME	SCIOLI, DANIEL		1.2 NAME					
STREET AODRESS	ANCHORENA 665 (1170)		1.3 STREE	T ADDRESS				
City ST-709	BUENOS AIRES, ARGENT		1.4 CITY -	ST - ZIP				
NAME		[] DETELE		ļ		L Change	Addition	
STREET ADORESS			2.2 NAME	T ADDRESS				
City-St-7-P			2.4 CITY-	ı			1	
TILE		DELETE	3.1 TITLE			Change	e	
NAME			3.2 NAME]				
STREE ADDRESS				ADDRESS			'	
CITY-ST ZIP		T DELETE	3.4. CITY- 4.1 TITLE	ST-ZIP	- the target of target of target of the target of targ	Change	Addition	
THLE NAME		L_ become	4.1 HILE 4.2 NAME			L. Cliange	L_J Addition	
S'REET ADDRESS				T ADDRESS			ļ	
CITY-SU ZIII			4.4 CITY -	ST-ZIP				
TPLE		DELETE	51 TITLE			☐ Change	Addition	
NAME			5.2 NAME				İ	
STREET APPRIESS.				I ADDRESS			İ	
Cory - St. 7.4 Tal. E	The second secon	☐ DELEYE	5.4 CITY -	SI-ZIP		Change	Addition	
NAM:		GALLETTE	6.2 NAME			Change		
STREET ADDRESS				ADDRESS				
CHY ST ZIP			64 CITY - 1					
14. 1 do berel	by certify that the information sup on indicated on this annual recor	pplied with this time does not qual	lify for the exe	emption states	d in Section 119.07(3)(i), Florida Statute	s. I further certify the	at the	
Lam an o appears i	flicer or director of the corporati in Block 12 or Block 13 if prange	on or the receiver or trustee empored, or or an attachment with an ad	wered to execute idress.	cute this repo	It my signature shall have the same leg of as required by Chapter 607, Florida	Statutes; and that my	r name	

SIGNATURE:

NATURE AND YPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/97 (303)299