

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

FILED
Apr 28, 1999 8:00 am
Secretary of State

04-28-1999 90002 044 ***158.75

DOCUMENT # P96000029856

1. Corporation Name

HORIZON WATERWAYS INTERNATIONAL, INC.

Principal Place of Business

7270 NW 12 ST #660
MIAMI FL 33126

Mailing Address

7270 NW 12 ST #660
MIAMI FL 33126

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/22/1996

4. FEI Number

65-0653932

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 Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 7200 N.W. 19th. St.

Suite, Apt. #, etc.

22 Suite 412

City & State

23 Miami FL

Zip

24 33126

Country

25 Miami-Dade

2a. Mailing Address

26 7200 N.W. 19th. St.

Suite, Apt. #, etc.

27 Suite 412

City & State

28 Miami, FL

Zip

29 33126

Country

30 Miami-Dade

9. Name and Address of Current Registered Agent

LOPEZ, JOSEPH F
250 BIRD RD
SUITE 302
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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. 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. OFFICERS AND DIRECTORS

TITLE DP ☐ DELETE

NAME VILLAVICENCIO, ROBERTO

STREET ADDRESS 7270 NW 12TH ST, #660

CITY-ST-ZIP MIAMI FL 33126

TITLE VPS ☐ DELETE

NAME VILLAVICENCIO, REBECCA

STREET ADDRESS 7270 NW 12TH ST, #660

CITY-ST-ZIP MIAMI FL 33126

TITLE VP ☐ DELETE

NAME VILLAVICENCIO, ROBERT MARTIN

STREET ADDRESS 7270 NW 12TH ST, #660

CITY-ST-ZIP MIAMI FL 33126

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition

1.2 NAME Villavicencio, Roberto

1.3 STREET ADDRESS 7200 N.W. 19th. St. #412

1.4 CITY-ST-ZIP Miami, FL 33126

2.1 TITLE VPS ☒ Change ☐ Addition

2.2 NAME Villavicencio, Rebecca

2.3 STREET ADDRESS 7200 N.W. 19th. St. #412

2.4 CITY-ST-ZIP Miami, FL 33126

3.1 TITLE VP ☒ Change ☐ Addition

3.2 NAME Villavicencio, Robert Martin

3.3 STREET ADDRESS 7200 N.W. 19th. St. #412

3.4 CITY-ST-ZIP Miami, FL 33126

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

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

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 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 in an attachment with an address, with a letter like empowered.

SIGNATURE:

Roberto Villavicencio, President

4/23/99 305-591-3889

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0162415