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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600039333 (5)

CLUB DE VACACIONES (USA), INC.

FILED May 06 1997 8:00am Secretary of State



Principal Place of Business Mailing Address \$ 80 S.W. 8TH ST. SUITE 2077 MIAMI FL 33130 Miami FL 33130 Mailing Address \$ 80 S.W. 8TH ST. SUITE 2077 MIAMI FL 33130						3. Date Incorporated or Qualified 3a. Date of Last Report			
	Place of Business	2a. Mailing Address	W 129	Can)	······································	05/07/1996 4. FEI Number 65-0664 308			pplied For
Suite, Apt		26 7270 N Suite, Apt. #, etc		UIN	•	63-007 000			ot Applicable
2	SUITE 250 27 SUITE 2			250		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	e	City & State				6. Election Campaign Financing		\$5.00	May Be
<u> </u>	MIDHI, FLORIDA	28 H/AH	FLOR	101	<u> </u>	Trust Fund Contribution			to Fees
7ip 331	26 Country	29 33/26		OŠ UŠ		This corporation has liability for life Florida Statutes	ntangible t Yes	-	s. 199.032,
4	g. Name and Address of Cur		[30]	Y	~	10. Name and Address of New Re			
AGF	RAMUNT, LUIS	······································	·	81	Name		· · · · · · · · · · · · · · · · · · ·		
80 S.W. 8TH STREET					Street Add	iress (P.O. Box Number is Not Acceptab	le)		
SUITE 2077						The first own transport to Harrisophia		,	
MIA	MI FL 33130			83					
				84	City	······································	FL	85 Zip	Code
SIGNATURE	Stgnature, typed or printed name of registered	d agent and lite if applicable				poration submits this statement for the partion's board of directors. I hereby acception when reinstating)	DATE		
2	1	AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TLE	D UCDET ALCOHOL	☐ DELETE		TITLE			,	Change	Addition Addition
HME REET ADDRESS	LOPEZ, ALFONSO % 80 S.W. 8TH ST. SUITE 1	2077	1	NAME	ADDRESS				
HEET AUDMESS TY-ST-ZIP	MIAMI FL 33130	EUII	1	CITY-S	ì				
11151-211	D	☐ DELETE		TITLE				Change	Additi
W E	ARANDA, EDUARDO		2.2	NAME					
TREE1 ADDRESS	% 80 S.W. 8TH ST. SUITE	2077	2.3	STREET	ADDRESS				
TY-ST-ZIP	MIAMI FL 33130	☐ DELETE		CITY-	ST-ZIP			Change	Additi
ILF Ame	D NIETO, ALFONSO	LLJ OELER		TITLE				COMINITY	L.J AGOIL
rret address	% 80 S.W. 8TH ST. SUITE	2077			ADDRESS				
TY-ST-ZiP	MIAMI FL 33130			CITY-:					
TLF	D	DELETE		TITLE				Change	☐ Additi
AME	VICENTE, JOSE L			NAME					
IREET ADORESS	% 80 S.W. 8TH ST. SUITE	201 <i>1</i>	4.3		ADDRESS				
TY-ST-ZIP									
11 5	MIAMI FL 33130	☐ DELETE		TITLE	1-2112			Change	Additi
	MIAMI FL 33130	☐ DELETE	Ē 5.1	TITLE	1-417			Change	Additi
AMÉ	MIAMI FL 33130	DELETE	5.1 5.2	TITLE NAME	ADORESS			Change	Addıti
AME TREET ADDRESS	MIAMI FL 3313U		5.1 5.2 5.3 5.4	TITLE NAME	ADORESS			- ·	
ITLE Ame Treet address (Ty-ST-Zip ITLE	MIAMI FL 3313U	☐ DELETE	5.1 5.2 5.3 5.4	TITLE NAME STREET	ADORESS			☐ Change	☐ Additi
ame Treet address (Ty-ST-ZIP Tle Ame	MIAMI FL 3313U		5.1 5.2 5.3 5.4 6.1 6.2	TITLE NAME STREET CITY-S TITLE NAME	ADDRESS ST-ZIP			- ·	
AME TREET ADDRESS ITY-ST-ZIP TLE	MIAMI FL 3313U		5.1 5.2 5.3 5.4 6.1 6.2 6.3	TITLE NAME STREET CITY-S TITLE NAME	ADDRESS T-ZIP ADDRESS			- ·	

4. I do hereby certify that the information sopplied with this thing district quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or purplement and proof 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 object of the object of the object. The reserve of the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 17 if the region of the object.

IGNATURE: SIGNATURE AND TYPE DOG STATED WASHE OF SUGNING DEFICER OR DIRECTOR D. BY C. ASR QUILLY A Page in End Office