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PROFIT
CORPORATION
ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000044120 (9)

LA PUERTA DE SAN LUIS. INC. Principal Place of Business Mailing Address 701 S.W. 27TH AVE. 701 S.W. 27TH AVE. LOCAL 5 LOCAL 5 MIAMI FL DO NOT WRITE IN THIS SPACE MIAMI FL 3. Date Incorporated or Qualified 05/17/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0674629 Not Applicable 21 26 Suite, Apt #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 Trust Fund Contribution Added to Fees Country Zio Zio Country 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes ☐ No 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PRADO, JUSTO 701 S.W. 27TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) LOCAL 5 MIAMI FL 83 84 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 (NOTE Registered Agent signature required when rainstating) Signature: Typed or photograms of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition PRADO, JUSTO NAME 1.2 NAME 701 S.W. 27TH AVE. LOCAL 5 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL City - ST - ZIP 1.4 CITY - ST - 2(P DELETE Addition TITLE 21 TITLE ☐ Change selkis Rivero RIPERO BOIKIS N 271 W 42 Streets L. T. 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 33012 CITY-ST-2IP 2 4 C(1Y - S1 - Z(P Addition TITLE 31 1111 8 NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELFTE Change TITLE 4.1 TOTLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-7IP DELFTE Change Addition TITLE 51 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 1**010**1010101225.7113771 -05/25/98--01012--043 NAME **6.2 NAME** STREET ADDRESS **6.3 STREET ADDRESS**

14. I hereby certify that the information straight of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information of 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 ificulanged, dignary and address.

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Block 12 or Block 13 ifictiangel, d.d. an)attachment with an address.

CR2E034 (10/97)

FILED

Jun 24 1998 8:00am

Secretary of State