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

PROFIT CORPORATION ANNUAL REPORT

1997

NAME

TITLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000055373 (0)

GARCIA, ELKINS & CARBONELL, P.A.

Mailing Address Principal Place of Business 105 S. NARCISSUS AVENUE 105 S. NARCISSUS AVENUE SUITE 802 SUITE 802 W PALM BEACH FL 33401-5530 W PALM BEACH FL 33401 3. Date Incorporated or Qualified 3a. Date of Last Report 06/28/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-06758 Not Applicable 26 Suite, Apt #, etc. Suite, Apt #, etc. \$8,75 Additional Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zıp Country Zip B. This corporation has liability for intangible tax under s. 199.032, Yes No 24 30 Florida Statutes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GACIA, ISIDRO M 105 S. NARCISSUS AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 802** 83 W PALM BEACH FL 33401 84 Zip Code City 85 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** (NOTC Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DELETE Addition TITLE 11300 GARCIA, ISIDRO M NAME 1.2 NAME % 105 S. NARCISSUS AVENUE SUITE 802 STREET ADDRESS 13 STREET ADDRESS W PALM BEACH FL 33401 CITY-ST-ZIP 1.4 City-St-ZiP Change Addition DELETÉ TITLE 21 THLE GARCIA, ISIDRO M NAME 2.2 NAME % 105 S. NARCISSUS AVENUE SUITE 802 2 3 STREET ADDRESS STREET ADDRESS W PALM BEACH FL 33401 CITY-ST-ZIP 2 4 CITY-S1 - ZIP ☐ DELETE Change Addition TITLE 3 1 1ITLE CARBONELL, MARK F NAME 3.2 NAME % 105 S. NARCISSUS AVENUE SUITE 802 STREET ADDRESS 33 STREET ADDRESS W PALM BEACH FL 33401 CITY-ST-ZIP 3 4. C(TY - S1 - ZIP DELETE Change Addition TITLE 4.1 THE

64 CITY-S1-ZIP

14. To 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 eath, that I am an officer or director of the corporation or the 70 eigen 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 challighd, or in an attractment with an address.

4.2 NAMI

5.11016

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

4.4 CHY - ST - ZIP

CR2E034 (9/96)

Addition

Addition

Change

FILED

Jun 03 1997 8:00am

Secretary of State