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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000058168 (1)

LA CONCHA REINA MARINA, INC.

51 1 101							-{			
Principal Place of Business Mailing Address										
11870 WALSH BLVD. MIAMI FL 33184			11870 WALSH BLVD. Miami Fl. 33184			DO NOT WRITE	IN THIS !	SPACE		
							3. Date Incorporated or Qualified			
							07/11/1996			
-	ace of Business	—	2a. Mailing Address				4. FEI Number			pplied For
Cuito Ant	H etc	26	uite, Apt #, etc.				65-0678803			lot Applicable
Suite, Apt. #, etc.		27	∤ ¬				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State)	F + η	ity & State				6. Election Campaign Financing			May Be
Zip	Country	28	D	Co	untry		Trust Fund Contribution			to Fees
1	25	29	,,	30	ui ii y		This corporation owes or has pair Personal Property Tax due June	_		ntangibie □ No
<u> </u>	9. Name and Address of Curre		ed Agent	30	Τ-		10. Name and Address of New Reg			
DIV	Z, REINOL				81	Name				
	70 WALSH BLVD.				82	Ctrant Addr	(D.O. Davidi makes in Alex Accounts)	<u> </u>		
	MI FL 33184				04	Street Addre	ess (P.O. Box Number is Not Acceptab	.е)		
171147	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				83					
					84	City			DE 7:-	Codo
					~	City		FL	85 Zip	Code
SIGNATURE	Signature, typied or printed nation of page letted as			OLE Register	ed Age	nt signature require	ed when reinstating)	DATE		
12.	OF ICERS A	AD DIBECTO		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	DP		DELETE		ITLE				Change	Addition
NAME	DIAZ, REINOL				IAME	ļ				
STREET ADDRESS	11870 WALSH BLVD.					ADDRESS				
CITY-ST-ZIP TITLE	MIAMI FL 33184 DT		DELETE		HTY-S	T-ZIP			Change	Additio
NAME	DIAZ. ROSARIO		L. Dittie		NAME				Jing	
STREET ADORESS	11870 WALSH BLVD.					ADDRESS				
CITY-ST-ZIP	MIAMI FL 33184			1	CITY-S	ſ				
TITLE			DELETE	3.1	ITLE				Change	Additio
NAME				3.21	NAME					
STREET ADDRESS				3.3 5	STREET	ADDRESS				
CITY-S1-ZIP		-			CITY-S	ST-ZIP				
TITLE			DELETE	I.	ITLE				Change	Additio
NAME				1	NAME					
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP			DELETE		CITY-S	ST - ZIP			Change	Additio
TITLE			ריין מנונונ		IITLE				LI Unange	[] A00100
NAME OTOGET ADDOCES					NAME	4000000				
STREET ADDRESS				5.3	SIRLET	ADDRESS				

14. Thereby 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 suppliemental 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 on an attachment with an address.

5.4 CITY - ST - ZIP

6.4 CITY-S1-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE: *

CITY-SI-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Reinof

* 3-5-98 (301) \$54-4569

Change

Addition

FILED

Mar 11 1998 8:00am

Secretary of State

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