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FILED

Apr 29 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000058910 (6)

1. Corporation Name

ENTREPRENEUR INVESTMENT CORPORATION



Principal Place of Business

Mailing Address

7795 WEST FLAGLER STREET STE 8  
MIAMI FL 33144

7795 WEST FLAGLER STREET STE 8  
MIAMI FL 33144

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/11/1996

2. Principal Place of Business

21 3161 S. Ocean Drive

2a. Mailing Address

26 3161 S. Ocean Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 903

27 903

City & State

City & State

23 Hallandale, FL

28 Hallandale, FL

Zip

Country

Zip

Country

24 33009

25 U.S.A.

29 33009

30 U.S.A.

4. FEI Number

65-0685671

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CUERVO, CONJANEA  
7795 WEST FLAGLER STREET STE 8  
MIAMI FL 33144

10. Name and Address of New Registered Agent

81 Name

Cuervo, Constanza

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

3161 S. Ocean Drive 903

83

84 City

Hallandale

FL

85 Zip Code

33009

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]*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

04/29/98  
DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D LONDONO, GUSTAVO  
STREET ADDRESS 9920 NW 44TH TERRACE  
CITY-ST-ZIP MIAMI FL 33178

TITLE ☐ DELETE

NAME D LONDONO, CONSTANZA C  
STREET ADDRESS 9920 NW 44TH TERRACE  
CITY-ST-ZIP MIAMI FL 33178

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 ☒ Change ☐ Addition

1.2 NAME D Londono Gustavo  
1.3 STREET ADDRESS 3161 S. Ocean Drive 903  
1.4 CITY-ST-ZIP Hallandale, FL 33009

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME D Londono, Constanza  
2.3 STREET ADDRESS 3161 S. Ocean Drive 903  
2.4 CITY-ST-ZIP Hallandale, FL 33009

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

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 on an attachment with an address.

SIGNATURE *[Signature]*

04/29/98

954-458334

CR2E034 (10/97)