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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Mar 09 1998 8:00am Secretary of State

| | 1998 | DIVISION OF | CORPORATIONS | Societary of State |
|--|--|--|--------------------------------------|--|
| | MENT # P9600 On, INC, | 0072385 (3) | | |
| Principal Plac | o of Business | Mailing Address | | |
| , | | - | | |
| 9600 NW 25' MIAMI FL 33 | TH ST. SUITE 3F 173 | 9600 NW 25TH ST. SUI MIAMI FL 33173 | TE 3F | DO NOT WRITE IN THIS SPACE |
| | | | | 3. Date Incorporated or Qualified 08/30/1996 |
| 2. Principal P | lace of Business | 2a. Mailing Address | | 4. FEI Number 65-0774147 Applied For |
| 21 | | 26 | | APPLIED FOR Not Applicable |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired \$8.75 Additional |
| 22 | | 27 | | Fee Required |
| City & Stat | | City & State | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution |
| ^{Zip} | Country | Zip | Country | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 | 29 | 30 | Personal Property Tax due June 30. Yes No |
| | 9. Name and Address of Curre | nt Registered Agent | | 10. Name and Address of New Registered Agent |
| 10 | ESA, MANUEL A 00 BRICKELL AVE AMI FL 33131 | | 81 Name 82 Stree 83 84 City | t Address (P.O. Box Number is Not Acceptable) |
| 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) | | | | |
| 12. | | ID DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | D | DELETE | 1.1 TITLE | Change Addition |
| NAME | GONZALEZ, ORLANDO A | - " | 1.2 NAME | |
| STREET ADDRESS | 9600 N 25TH ST, SUITE 3F | | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | MIAMI FL 33173 | | 1.4 CITY-ST-ZIP | |
| TITLE | 1110 4111 1 2 2 2 1 1 2 | ☐ DELETE | 2.1 TITLE | ☐ Change ☐ Addition |
| NAME | | _ | 2.2 NAME | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 2. 4 CITY-ST-ZIP | ! |
| TITLE | | DELETE | 3.1 TITLE | Change Addition |
| NAME | | | 3.2 NAME | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | |
| TITLE | | DELETE | 41 TITLE | ☐ Change ☐ Addition |
| NAME | | | 4. 2 NAME | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | |
| TITLE | | ☐ DELETE | 5.1 TITLE | ☐ Change ☐ Addition |
| NAME | | | 5.2 NAME | |
| | | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP TITLE | - | DELETE | 5.4 CITY-ST-ZIP 6.1 TITLE | Change Addition |
| 1 | | | 1 | C. Cuange C. Adumon |
| NAME CTOTET ADDOCCO | | | 6.2 NAME | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | edify that the information contribed to | ith this filing does not qualify to | 6.4 CITY-ST-ZIP | ed in Section 119 07/(3)(i) Floride Statutes Justines continues that the information |
| indianted | on this papied report or cupylements | of applied separational and and | or the exemption stat | ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information |

indicated on this amount epon or supplying that amount epon 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 processor 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, gion an algorithment with an address

08/08/98 (25) 593 704/