FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT

1997

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

FILED
Mar 12 1997 8:00am
Secretary of State

DOCUMENT # **P96000081336 (5)**

1. Corporation Name
CAYO COLONY, INC.

Principal Place of Business
501 BRICKELL KEY DRIVE #200
MIAMI FL 33131

Mailing Address
501 BRICKELL KEY DRIVE #200
MIAMI FL 33131-2608

3. Date Incorporated or Qualified: **09/30/1996**
3a. Date of Last Report:

2. Principal Place of Business
21 Key Colony No. 3
Suite, Apt. #, etc.
22 151 Crandon Blvd.,Apt. 841
City & State
23 Key Biscayne, FL
Zip 24 33149
Country 25 USA

2a. Mailing Address
26 Key Colony No. 3
Suite, Apt. #, etc.
27 151 Crandon Blvd., Apt. 841
City & State
28 Key Biscayne, FL
Zip 29 33149
Country 30 USA

4. FEI Number: ☒ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
NATIONAL REGISTERED AGENTS, INC.
501 BRICKELL KEY DRIVE #200
MIAMI FL 33131

10. Name and Address of New Registered Agent
81 Name: National Registered Agents, INc.
82 Street Address (P.O. Box Number is Not Acceptable): 701 Brickell Ave.
83 Suite 1800
84 City: Miami FL 85 Zip Code: 33131

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 reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE: PD ☐ DELETE
NAME: FERNANDEZ-PIRLA, JOSE M
STREET ADDRESS: ~~501 BRICKELL KEY DRIVE #200~~
CITY-ST-ZIP: ~~MIAMI FL 33131~~

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
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CITY-ST-ZIP

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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: Fernandez-Pirla, Jose M.
1.3 STREET ADDRESS: Key Colony No. 3
1.4 CITY-ST-ZIP: ~~151 Crandon Blvd., Apt. 84~~ Key Biscayne, FL 33149

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

CR2E034 (9/96)

3/12

$173.75

14. I do 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: February, 7-1997 305-365-0002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #