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FILED
Apr 14 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 # P97000003193 (4)

1. Corporation Name
COCHA WESTON, INC.



Principal Place of Business
1701 HIGHWAY A-1-A
SUITE 220
VERO BEACH FL 32963

Mailing Address
1701 HIGHWAY A-1-A
SUITE 220
VERO BEACH FL 32963

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

01/13/1997

4. FEI Number

65-0718491

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

HATCH, IRA C
1701 HIGHWAY A-1-A
SUITE 220
VERO BEACH FL 32963

10. Name and Address of New Registered Agent

81 Name EUGENIO LASCURAIN

82 Street Address (P.O. Box Number Is Not Acceptable)
13051 SW 29 CT

83

84 City DAVIDE

FL

85 Zip Code 33330

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 fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3/30/98

12. OFFICERS AND DIRECTORS

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

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 President ☐ Change ☒ Addition

1.2 NAME

EUGENIO LASCURAIN

1.3 STREET ADDRESS

13051 SW 29 CT

1.4 CITY-ST-ZIP

DAVIDE FL 33330

2.1 TITLE

Secretary VP

2.2 NAME

JANE L BARRERA

2.3 STREET ADDRESS

2537 MONTCLAIRE CIR

2.4 CITY-ST-ZIP

WESTON FL 33327

3.1 TITLE

Director VP

3.2 NAME

MARIA LASCURAIN

3.3 STREET ADDRESS

13051 SW 29 CT

3.4 CITY-ST-ZIP

DAVIDE FL 33330

4.1 TITLE

ELIZABETH ROMERO VP Director ☐ Change ☒ Addition

4.2 NAME

2537 MONTCLAIRE CIR

4.3 STREET ADDRESS

WESTON FL 33327

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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, on an attachment with an address.

SIGNATURE

EUGENIO LASCURAIN

3/30/98 (954) 249/4023

CR2E034 (10/97)