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**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**  **FILED** 

Mar 26 1998 8:00am

Secretary of State

DOCUMENT #

1. Corporation Name P9700006604 (7)

CORDOBA INVESTMENTS, INC.

1300 BRICKELL AVENUE   SUITE 20   SUITE 20   MIAMIR FL 31313	Principal Plan	ne of Business	Mailing Address								JIII 4181 1 <b>88</b> 1	
SUITE 200 MAMN FL 33131  2. Principal Place of Business 2. A Mailing Address 2. Enter the Control of Business 3. Election Compatign Financing 3. Sold May & State 3. Election Compatign Financing 3. Trust Fund Control of Business 3.	•		-	Shii i C								
2. Principal Place of Business   2a Mailing Address   4. FEI Number   Applied   21   21   26   Suite, Apt. #, etc.   Suite, Apt. #,		ELL AVENUE		INUE								
2. Principal Place of Business	MIAMI FL 33	1131	MIAMI FL 33131	MIAMI FL 33131			ļ.,					
2								·	J			
22   26   55-0734670   Not Appl 22   27   Country   58.75 Appl, #, etc.   27   State   58.04 Appl, #, etc.   27   State   58.04 Appl, #, etc.   28   State   58.04 Appl, #, etc.   28   State   58.05 Appl, #, etc.   28   State   28   St	9 Principal I	Place of Rusiness	2. Mailing Address	······							police For	
Surie, Apt. #, etc.    Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie, Apt. #, etc.   Surie,		INCO OF DUSTIONS	<u> </u>				'			<u> </u>		
City & State  Country  Zep  Zep  Country  Zep  Country  Zep  Country  Zep  Country  Added to Fee  Required  Fee Re		. #, etc.										
City & State  28  29  20  20  20  20  20  20  20  20  20		,						5. Certificate of Status Desired				
28	City & Sta	te		<u></u>				8. Election Campaign Financing		\$5.00	May Be	
Country   Zip   Country   Zip   Country   Zip   Country   Registered Agent   Registered Registered Agent   Registered Registered Agent   Registered Regi	23	_	28		_	_						
CASTILLO, ALVARO B   1390 BRICKELL AVENUE SUITE 200 MIAMI FL 33131   80   City   Street Address (P.O. Box Number is Not Acceptable)   82   Street Address (P.O. Box Number is Not Acceptable)   83   Street Address (P.O. Box Number is Not Acceptable)   84   City   FL   85   Zip Code   85   City   FL   85   Zip Code   87   City   FL   87   City   Street Address (P.O. Box Number is Not Acceptable)   87   City   FL   87   City   FL   87   City   Street Address (P.O. Box Number is Not Acceptable)   87   City   FL   87   City   FL   City   City   FL   City   FL   City   City   FL   City   City   FL   City   City   FL   City	Zip	Country	Zip	Cou	intry		1	8. This corporation owes or has	paid the c	urrent year In	tangible	
CASTILLO, ALVARO B 1390 BRICKELL AVENUE SUTE 200 MIAMI FL 33131  11. Pursuant to the provisions of Socitoris 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist agent lam flamful rule), and decorpt the obligations of Socitoris 607.0502 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registed 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 registed agent and flamful rule), and decorpt the obligations of Socitoria Office Corporation's board of directors. I hereby accept the appointment as registed agent and provided specified agent and state appointment as registed agent and provided specified agent and state appointment as registed agent and state agent agent and state agent agent agent and state agent	24			30						_7.1	☐ No	
B2 Street Address (P.O. Box Number is Not Acceptable)  ### City   FL   85   Zip Code   ### Cit			Current Registered Agent		221			D. Name and Address of New	Registered	d Agent		
SUITE 200 MIAMI FL 33131  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-nemed corporation submits this statement for the purpose of changing its regist 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 registed agent. I am lamiliar with, and accept the obligations of, Soction 607.0505, Florida Statutes.  SIGNATURE Signature hybriter prefet name of ingritered agent and info it applicated.  NOTE Registered Agent signature required when remitating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  TITLE DP VI Change AUBEN KAUFMAN  13. SIREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  14. IT III.  DY VI Change AUBEN KAUFMAN  13. SIREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  14. IT III.  DY VI Change AUBEN KAUFMAN  13. SIREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  14. IT III.  DIRECTORS IN 1.  15. IT III.  DIRECTORS IN 1.  16. IT III.  DIRECTORS IN 1.  17. IT III.  DIRECTORS IN 1.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  19. ADDITIONS/CHANGES TO OFFICERS					81	Name	9					
MIAMI FL 33131    83					82	Street	1 Address	(P.O. Box Number is Not Accept	able)			
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 agent are fertiled with, and accept the obligations of, Soction 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the approximent as registed agent are fertiled with, and accept the obligations of, Soction 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the approximent as registed agent are fertiled with, and accept the obligations of, Soction 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the approximent as registed agent agrature required when remissibly.  ISIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 ITILE  D/P  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 ITILE  D/P  RUBEN KAUFMAN  13.3 SIRECT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 ITILE  D/P  RUBEN KAUFMAN  13.90 BRICKELL AVENUE, SUITE 200  MIAMI FL 33131  Change A City-St-Zip  MIAMI FL 33131  DELETE  1.2 NAME  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 ITILE  D/P  RUBEN KAUFMAN  13.90 BRICKELL AVENUE, SUITE 200  22.1 ITILE  D CHANGE  13.90 BRICKELL AVENUE, SUITE 200  33.5 SIRECT ADDITESS  13.90 BRICKELL AVENUE, SU				ı	إيا							
11. Pursuant to the provisions of Socious 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist 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 registe agent, arm termuliar with, and accept the obligations of, Socion 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  Stream in provisions of Socions 607.0505, Florida Statutes.  INOTE Registered Agent e-prature required when remarking)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  TITLE  DP  STREET ADDRESS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  13. SIRRET ADDRESS IN 1  13. SIRRET ADDRESS IN 1  13. SIRRET ADDRESS IN 1  13. SADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  14. CITY-ST-ZIP  NAME  RUBEN KAUFMAN  13. SIRRET ADDRESS  13.90 BRICKELL AVENUE, SUITE 200  13. SIRRET ADDRESS  13.90 BRICKELL AVENUE, SUITE 200  22. NAME  13. SIRRET ADDRESS  13. SIRRE	M	IAMI FL 33131			63							
11. Pursuant to the provisions of Socious 607 0502 and 607 1508, Florida Statutes, the abovenamed corporation submits this statement for the purpose of changing its regist 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 registe of sequence agent and left in purpose of changing its regist of sequence agent and left in purpose of changing its regist of sequence agent and left in purpose of changing its regist of sequence agent and left in purpose of changing its regist of sequence agent and left in purpose of changing its regist of sequence agent agent and left in purpose of changing its regist of sequence agent agent and left in purpose of changing its regist of sequence agent agent agent and left in purpose of changing its regist of sequence agent agent agent agent agent and left in purpose of changing its regist of sequence agent agen					84	City				<b>85</b> Zip	Code	
office or registered agent, or both, in the State of Florida Stutch change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Soction 607 0505, Florida Stutches  SIGNATURE  SIGNAT	11 Pureuant	to the provisions of Sections 60	17 0502 and 607 1508 Florida S	tatutes the a	hove	-namez	d corporat	tion submits this statement for the			ts registered	
SIGNATURE   Signature. Lypication provided name of registerious apert and liter if applicable   INOTE Registered Apert agrative required when reministry)   DATE	office or	registered agent, or both, in the	State of Florida. Such change v	was authorized	d by	the cor	rporation's	s board of directors. I hereby acc	ept the ar	opointment as	registered	
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 TITLE  D PETRI, GUILLERMO 1390 BRICKELL AVENUE, SUITE 200 MIAMI FL 33131  TITLE  D CLETE 14 CITY-ST-ZIP MIMI FL 33131  TITLE  D CLETE 15 TITLE  D CLETE 17 TITLE  D CLATAGE MIAMI FL 33131  TITLE  D CLETE 18 TITLE  D CLATAGE MIAMI FL 33131  TITLE  D CLETE 18 TITLE  D CLATAGE MIAMI FL 33131  TITLE  D CLETE 18 TITLE  D CLATAGE MIAMI FL 33131  TITLE  D CLATAGE  MIAMI FL 3313		am ramiliar with, and accept the	obligations of, Section 607.050	5, Fiorida Stat	lutes							
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.  TITLE  D PETRI, GUILLERMO 1390 BRICKELL AVENUE, SUITE 200 MIAMI FL 33131  DELETE 1.1 TITLE  D/P RUBEN KAUFMAN 1.3 STREET ADDRESS 1390 BRICKELL AVENUE, SUITE 200 MIAMI FL 33131  Change A RUCHTEIN, LUIS E 1390 BRICKELL AVENUE, SUITE 200 MIAMI FL 33131  Change A STREET ADDRESS 1390 BRICKELL AVENUE, SUITE 200 MIAMI FL 33131  DELETE 1.1 TITLE  D 1.2 NAME 2.1 TITLE  D 2.2 NAME 2.3 STREET ADDRESS 1390 BRICKELL AVENUE, SUITE 200 MIAMI FL 33131  Change A 3.1 TITLE  MAME  STREET ADDRESS 1390 BRICKELL AVENUE, SUITE 200 MIAMI FL 33131  DELETE 1.1 TITLE  1.1 TIT	SIGNATURE	Signature, typest or printed name of registr	eved agent and title if applicable	(NOTE Registere	d Agei	nt eignatur	re required wh	hen reinstating)	DATE			
NAME   PETRI, GUILLERMO   1390 BRICKELL AVENUE, SUITE 200   MIAMI FL 33131   Change   A CITY-ST-ZIP   Change   A CITY-ST-ZIP   MIAMI FL 33131   Change   A CITY-ST-ZIP   MIAMI FL 33131   Change   A CITY-ST-ZIP   Change	12.								ICERS AN	ND DIRECTOR	RS IN 12	
NAME   STREET ADDRESS   1390 BRICKELL AVENUE, SUITE 200   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   MIAMI FL 33131   Change   A CITY-ST-ZIP   Change	TITLE	Ď	<b>★</b> DELETE	1.1 T/	TLE		D/P			Change	Addition	
1390 BRICKELL AVENUE, SUITE 200   13 STREET ADDRESS   1390 BRICKELL AVENUE, SUITE 200   13 STREET ADDRESS   1390 BRICKELL AVENUE, SUITE 200   14 CITY-ST-ZIP   1390 BRICKELL AVENUE, SUITE 200   14 CITY-ST-ZIP   1390 BRICKELL AVENUE, SUITE 200   14 CITY-ST-ZIP   1390 BRICKELL AVENUE, SUITE 200   15 STREET ADDRESS   1390 BRICKELL AVENUE, SUITE 200   16 STREET ADDRESS   15	NAME	PETRI, GUILLERMO		1.2 N/	AME		1 '	N KAUFMAN		••		
CITY-ST-ZIP	STREET ADDRESS	1390 BRICKELL AVENU	e, suite 200	1.3 \$7	TREET	ADORESS			Suite	e 200		
TITLE	CITY-ST-ZIP	MIAMI FL 33131			ITY-S	r-ZIP						
1390 BRICKELL AVENUE, SUITE 200   2.3 STREET ADDRESS   MIAMI FL 33131   2.4 CITY-ST-ZIP   TITLE	TITLE	•	L DELETE	2.1 TI	TLE	•		,		Change	☐ Addition	
DELETE   D	NAME			2.2 N/	AME							
TITLE	STREET ADDRESS		e, suite 200	2.3 \$1	IREET	ADDRESS	1					
NAME   KAPLAN, JORGE   32 NAME   33 STREET ADDRESS   1390 BRICKELL AVENUE, SUITE 200   33 STREET ADDRESS   CITY-ST-ZIP   MIAMI FL 33131   34. CITY-ST-ZIP   Change   A						T-ZIP	ļ					
STREET ADDRESS   1390 BRICKELL AVENUE, SUITE 200   33 STREET ADDRESS   MIAMI FL 33131   34 CITY-ST-ZIP   TITLE   DELETE   4.1 TITLE   Change   A CITY-ST-ZIP			L_J DELETE							∐ Change	Addition	
CITY-ST-ZIP   MIAMI FL 33131   3.4 CITY-ST-ZIP     TITLE			- 01117- 000				1					
TITLE         DELETE         4.1 TITLE         Change         A           NAME         4.2 NAME         4.3 STREET ADDRESS         CITY-ST-ZIP         CITY-ST-ZIP         Change         A           TITLE         DELETE         5.1 TITLE         Change         A           NAME         5.2 NAME         Change         A			s, Suite 200	3.3 ST	REET	ADDRESS	1					
NAME         4.2 NAME           STREET ADDRESS         4.3 STREET ADDRESS           CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE         Change         A           NAME         5.2 NAME         A         A		MIAMI FL 33131	Drutte			T-ZIP	<del></del>			Channe	Ledition	
STREET ADDRESS         4.3 STREET ADDRESS           CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE         Change         A           NAME         5.2 NAME			☐ DETEIE	1						change	☐ Addition	
CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE         Change         A           NAME         5.2 NAME												
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CITY-ST-ZIP 64 CITY-ST-ZIP			· · · · ·							,		
14. I hereby certify that the information supplied with this killing 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		certify that the information supp	lied with this filing does not qual				ted in Sect	tion 119.07(3)(i), Florida Statutes	I further o	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 officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears it Block 13 if changed, or on an uttack that displays the same secure the same secure.	indicated officer or Block 12	on this annual report or supple director of the corporation or the or Block 13 if changed, or on a	mental annual report is true and the receiver or trustee empowered in uttaching the structures.	d to execute t	d tha his r	t my sig eport as	gnature sh is required	nall have the same legal effect as d by Chapter 607, Florida Statute	; if made u s; and that	inder oath; the t my name ap	at I am an pears in	

TRASURER