

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90168 030 ***150.00

DOCUMENT # P97000024732

1. Corporation Name
S.P. AMERICAS, INC.

Principal Place of Business

80 SW 8TH STREET
SUITE 2077
MIAMI FL 33130

Mailing Address

80 SW 8TH STREET
SUITE 2077
MIAMI FL 33130

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/17/1997

4. FEI Number

65-0735538

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 the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

AGRAMUNT, LUIS
80 SW 8TH STREET
SUITE 2077
MIAMI FL 33130

10. Name and Address of New Registered Agent

81 Name

Luis Agramunt

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

1221 Brickell Avenue, #1100

83

84 City

Miami

FL

85 Zip Code

33131

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 not applicable.

(NOTE: Registered Agent signature required when reinstating)

4-28-99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
D
ESCOLAR, FERNANDO
STREET ADDRESS
80 SW 8TH STREET, SUITE 2077
CITY-ST-ZIP
MIAMI FL 33130

TITLE ☐ DELETE

NAME
D
RAMIREZ, ALVARO
STREET ADDRESS
80 SW 8TH STREET, SUITE 2077
CITY-ST-ZIP
MIAMI FL 33130

TITLE ☐ DELETE

NAME
D
MONTES, GUILLERMO P
STREET ADDRESS
80 SW 8TH STREET, SUITE 2077
CITY-ST-ZIP
MIAMI FL 33130

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

Fernando Escolar Cuervo

1.3 STREET ADDRESS

904 N.W. 132nd Ave.

1.4 CITY-ST-ZIP

Sunrise, FL 33325

2.1 TITLE

Vice-President

☒ Change

☐ Addition

2.2 NAME

Guillermo Perez Montes

2.3 STREET ADDRESS

904 N.W. 132nd Ave.

2.4 CITY-ST-ZIP

Sunrise, FL 33325

3.1 TITLE

Treasurer

☒ Change

☐ Addition

3.2 NAME

Alvaro Ramirez Lopez-Terradas

3.3 STREET ADDRESS

904 N.W. 132nd Ave.

3.4 CITY-ST-ZIP

Sunrise, FL 33325

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 19.07(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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-99

Date

305-373-5802

Daytime Phone #

0184864

CR2E034 (1/98)