## FILED May 10, 1999 8:00 am Secretary of State 05-10-1999 90264 022 \*\*\*150.00

## PROFIT CORPORATION ANNUAL REPORT 1999

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

| DOCU  | MENT # POZOOO  | 030300  |  |  |                        |                       |
|---|--|---|--|--|------------------------|-----------------------|
| DOCUMENT # P97000029309 1. Corporation Name         |  |   |  |  |                        |                       |
| GROUPAZ CORPORATION                                 |  |   |  | a manifemat era järet elitta Albis Albis Albis Albis Albis   | i itata isida iilii as | 119 2011 10 <b>01</b> |
|   |  |   |  |  |                        |                       |
| Principal Place                                     | of Business  | Mailing Address   |  | -  | i Habar irida finia da |                       |
| 5581 SW 8TH STREET 5581 SW 8TH STREET               |  |   |  |  |                        |                       |
| MIAMI FL 33134 MIAMI FL 33134                       |  |   |  | DO NOT WRITE IN THIS SPACE   |                        |                       |
| US  |  | US  |  | 3. Date Incorporated or Qualified  |                        |                       |
|   |  |   |  | 04/01/1997   |                        |                       |
| Principal Place of Business     2a. Mailing Address |  |   |  | 4. FEI Number  |                        | ied For               |
| 21 26   |  |   | 65-0755824   |  | Applicable             |                       |
|   |  | Suite, Apt. #, etc.   |  | 5. Certificate of Status Desired   | \$8.75 Add             | 1                     |
| 22 27 City & State City & State                     |  | City & State  | <del> </del>   | 6. Election Campaign Financing   | \$5.00 M               |                       |
| 23  | •  | 28  |  | Trust Fund Contribution  | Added to               |                       |
| Zip   | Country  | Zip   | Country  | 8. This corporation owes the current year In   |                        |                       |
| 24  | 25   |   |  | Personal Property Tax.   |                        | 3No                   |
|   | 9. Name and Address of Curren  | t Registered Agent  | 81 Name  | 10. Name and Address of New Registered   | Agent                  |                       |
| AMERII AWYER CHARTERED                              |  |   |  | XDY LOPEZ  |                        |                       |
| 343 ALMERIA AVENUE                                  |  |   | 82 Street Addre  | ess (IV.O. Box Number is Not Acceptable)   | TE 305                 | <del>-</del> ]        |
| CORAL GABLES FL 33134                               |  |   | 83 // 47   | 5. W. 6/44.  |                        |                       |
|   | ~ ^ /  |   | 84 City ///  | <del></del>  | 85 Zip Co              | de -                  |
|   |  |   |  | ami FL   | _                      | /45                   |
| 11. Pursuant t                                      | to the provisions of sections 607.050  | oration submits this statement for the purpose of                     | i changing its re<br>intment as regit                  | egistered<br>stered  |                        |                       |
| orrice or re<br>agent. I ar                         | n familiar with, <b>exchange</b> of the obligation                               | tions of, Section 607.0505, Florid                                    | la Statutes.   | oration submits this statement for the purpose of a board of directors. I hereby accept the appoint  | D                      |                       |
| SIGNATURE   | X V I N ALFRE  | DO N. 112   | \ <i>X [!</i> '\                                       | 9/625/ 77  | <u>i</u>               | {                     |
| 12.   |  | t and title if applicable. (NOTE: P D DIRECTORS                       | 13.  | ADDITIONS/CHANGES TO OFFICERS A  | ND DIRECTOR            | S IN 12               |
| TITLE   | PD /   | ☐ DELETE  | 1.1 TITLE  |  | Change                 | ☐ Addition            |
| NAME  | PAZ, ALFREDO,Ń   |   | 12 NAME  |  |                        |                       |
| STREET ADDRESS                                      | 5593 S.W. 8TM STREET   |   | 1.3 STREET ADDRESS                                     |  |                        |                       |
| CITY-ST-ZIP   | MIAMI FL 33134   | ☐ DELETE  | 1.4 CITY-ST-ZIP/<br>2.1 TITLE                          | <u> </u>   | Change                 | Addition              |
| MI/E  | VD   |   | 2.2 NAME   |  | - •                    | _                     |
| NAME<br>STREET ADDRESS                              | Panzuto, Nelida H<br>5593 S.W. 8th Street  |   | 2 3 STREET ADDRESS                                     |  |                        |                       |
| CITY-ST-ZIP   | MIAMI-FL 33134   |   | 2.4 CITY-ST-ZIP  |  | ,                      |                       |
| TITLE   | VD   | ☐ DELETE  | 31 TITLE   | •  | Change                 | ☐ Addation            |
| · NAME  | -PAZ, SERGIO-A   |   | 3.2 NAME   |  |                        | }                     |
| STREET ADDRESS                                      | 5593 S.W. 8TH STREET   |   | 3.3 STREET ADDRESS                                     | -  |                        |                       |
| CITY-ST-ZIP   | MIAMI FL 33134   | ☐ DELETE  | 3.4. CITY-ST-ZIP                                       |  | Change                 | Addition              |
| TITLE   | SD<br>Paz, Elizabeth   | C octric  | 4.2 NAME   |  | _ •                    | -                     |
| STREET ADDRESS                                      | 5593 S.W. 8TH STREET   |   | 4 3 STREET ADDRESS                                     |  |                        |                       |
| CITY-ST-ZIP   | MIAMI FL 33134   |   | 44 CITY-ST-ZP  |  |                        |                       |
| TITLE   | SD   | ☐ DELETE  | 51 TITLE   | · · · <del></del>  | ☐ Change               | Addition              |
| NAME  | PAZ, ESTEBAN M   |   | 52 NAME  |  |                        | 1                     |
| STREET ADDRESS                                      | 5593 S.W. 8TH STREET   |   | 5.3 STREET ADDRESS                                     |  |                        | 1                     |
| CATY-ST-ZIP   | MIAMI FL 33134   | ☐ DELETE  | 5.4 CITY-ST-ZIP<br>6.1 TITLE                           |  | Change                 | Addition              |
| III.E   | TD   | □ Dereie  | 6.2 NAME   |  |                        |                       |
| NAME<br>CODECT ADODECS                              | PAZ, IGNACIO M   |   | 6.3 STREET ADDRESS                                     |  |                        |                       |
| STREET ADDRESS<br>CITY-ST-ZIP                       | 5593 S.W. 8TH STREET MIAMI: FL 33134   |   | 64 CT (-ST-DE/)  |  |                        |                       |
| 14. I hereby c                                      | ertify that the information supplied with  | th this filing does not qualify for t                                 | he exemption stated in Se                              | ection 119.07(3)(I), Florida Statutes. I further ce<br>shall have the same legal effect as if made und<br>red by Chapter 607, Florida Statutes; and that m | rtify that the info    | ormation              |
| indicated officer or o                              | on this annual report or supplemental<br>director of the corporation or the rece | annual report is true and accura-<br>iver or trustee empowered to ex- | are and may ny agnature<br>acute this report as requir | ed by Chapter 607, Florida Statutes; and that n  | ny name appear         | rs In                 |
| Block 12 d  | or Block 13 if changed, or on an attac   | hment with an address, with all o                                     | other like/eithr/dvered.                               |  | `                      |                       |