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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED Mar 25, 1999 8:00 am Katherine Harris **Secretary of State** Secretary of State

03-25-1999 90046 031 ***150.00

DOCUMENT # P97000037711 RANCHO ALEGRE INC. Mailing Address Principal Place of Business 61 TOTOLOCHEE DRIVE 61 TOTOLOCHEE DRIVE HIALEAH FL 33131 HIALEAH FL 33131 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/28/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0741786 Applied For APPLIED FOR Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired \Box Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State Trust Fund Contribution Added to Fees 28 23 Country Country Zip 8. This corporation owes the current year Intangible Zip **⊠**No Personal Property Tax. 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent TARIFA, FABIAN Street Address (P.O. Box Number is Not Acceptable) **61 TOTOLOCHEE DRIVE** HIALEAH FL 33131 Zip Code 84 85 City 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) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. ☐ Addition DELETE 1.1 TITLE TITLE TARIFA, FABIAN 1.2 NAME NAME **61 TOTOLOCHEE DRIVE** 1.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 33131 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition □ DELETE 2.1 TITLE Change TITLE TRUJILLO, ENRIQUE 2 2 NAME NAME PHILLIS COURT 2.3 STREET ADDRESS STREET ADDRESS **WAYNE NJ 07470** 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME MARTINEZ, FULGENCIO NAME **61 TOTOLOCHEE DRIVE** 3.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 33131 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 6.1 TITLE

CITY-ST-ZIP 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, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ATURABIANE CARIFAED SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TITLE

NAME

STREET ADDRESS

2/20/99