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FILED
May 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000045255 (1)

1. Corporation Name

MONTES OIL CORPORATION 2

Principal Place of Business

613 NAVARRE AVENUE
CORAL GABLES FL 33134

Mailing Address

613 NAVARRE AVENUE
CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/19/1997

4. FEI Number

65-0755064

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~~ has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 98210 OVERSEAS Highway
Suite, Apt. #, etc

22

City & State

23 Key Largo, FL
Zip 33037 Country USA

24

25

26. Mailing Address

26 P.O. Box 2469
Suite, Apt. #, etc

27

City & State

28 Key Largo, FL
Zip 33037 Country USA

29

30

9. Name and Address of Current Registered Agent

MONTES, EDWARD O
613 NAVARRE AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

EDWARD O. MONTES

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

98210 OVERSEAS Highway

83

84 City

Key Largo

FL

85 Zip Code 33037

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 date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/98

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME MONTES, EDWARD O
STREET ADDRESS 613 NAVARRE AVENUE
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE D ☐ DELETE

NAME MONTES, MAYRA
STREET ADDRESS 613 NAVARRE AVENUE
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE D ☐ DELETE

NAME MONTES, ANTONIO
STREET ADDRESS 613 NAVARRE AVENUE
CITY-ST-ZIP CORAL GABLES FL 33134

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 VICE-PRESIDENT/DIRECTOR ☒ Change ☐ Addition

1.2 NAME MONTES, EDWARD O.
1.3 STREET ADDRESS 98210 OVERSEAS Highway
1.4 CITY-ST-ZIP KEY LARGO, FL 33037

2.1 TITLE SECRETARY/DIRECTOR ☒ Change ☐ Addition

2.2 NAME MONTES, MAYRA
2.3 STREET ADDRESS 98210 OVERSEAS Highway
2.4 CITY-ST-ZIP KEY LARGO, FL 33037

3.1 TITLE VICE-PRESIDENT/DIRECTOR ☒ Change ☐ Addition

3.2 NAME MONTES, ANTONIO
3.3 STREET ADDRESS 98210 OVERSEAS Highway
3.4 CITY-ST-ZIP KEY LARGO, FL 33037

4.1 TITLE TREASURER/DIRECTOR ☐ Change ☒ Addition

4.2 NAME MONTES, ALEXANDER J.
4.3 STREET ADDRESS 98210 OVERSEAS Highway
4.4 CITY-ST-ZIP KEY LARGO, FL 33037

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 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 registered 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 addendum with an address.

SIGNATURE

Signature, typed or printed name of registered agent and date if applicable

4/24/98

CR2E034 (10/97)