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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000052156 (1)

FPL GROUP ARGENTINA, INC.

Mailing Address

## **FILED** Mar 26 1998 8:00am Secretary of State



| Principal Plac                                      | ce of Business                               | Mailing A                             | ddress            |             |   |                       | 1 (45)1951 114 (411) (45)1 4511 4511 64(1) 6511 6111 6111 6111 6111 6111   |             |
|---|--|---------------------------------------|-------------------|-------------|---|-----------------------|--|-------------|
| 11760 US HWY. 1. STE. 600 11760 US HWY. 1. STE. 600 |  |                                       |                   |             | DO NOT WRITE IN THIS SP.  3. Date Incorporated or Qualified  06/11/1997  4. FEI Number  26. Suite, Apt. #, etc.  5. Certificate of Status Desired  City & State  27. City & State  28. This corporation owes or has paid the currer Personal Property Tax due June 30.  Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name  82. Street Address (P.O. Box Number is Not Acceptable)  83. Street Address (P.O. Box Number is Not Acceptable)  84. City  FL  of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of clor both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appoint de accept the obligations of, Section 607.0505, Florida Statutes.  6. Election Campaign Financing  Trust Fund Contribution  10. Name and Address of New Registered Agent and the Bay accept the appoint of control in the Obligations of, Section 607.0505, Florida Statutes.  83. Address of Current Registered Agent agenture required when reinstating)  OFFICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND CITY-ST-2P  WARD F  WY. 1, STE. 600  14. CITY-ST-2P  22. NAME  14. CITY-ST-2P  ACLAN, MIGUEL J |                       |  |             |
| N. PALM BE  | ACH FL 33408                                 | N. PALM                               | BEACH FL 334      | 08          |   |                       | DO NOT WRITE IN THIS SPACE   |             |
|   |  |                                       |                   |             |   |                       | to the state of th |             |
|   |  |                                       |                   |             |   |                       |  |             |
| 2. Principal P                                      | Place of Business                            | 2a. Mailin                            | p Address         |             |   |                       |  | For         |
| 21  |  | <u> </u>                              | <b>3</b>          |             |   |                       | 15-0768769 Not App   |             |
| Suite, Apt. #, etc. Suite, Apt. #, etc.             |  |                                       |                   |             |   |                       | \$9.75 Addition  |             |
| 22  | ·  | 27                                    | •                 |             |   |                       | 5. Certificate of Status Desired L.J Fee Require   |             |
| City & Stat   | le   | · · · · · · · · · · · · · · · · · · · | State             |             |   |                       | 6. Election Campaign Financing \$5.00 May  | Re .        |
| 23  |  | 28                                    |                   |             |   |                       | 7-10-11-1  |             |
| Zip   | Country                                      |                                       |                   | Cou         | intry   |                       | 8. This corporation owes or has paid the current year Intangib   | le          |
| 24  | 25   | 29                                    |                   | 30          |   |                       | Personal Property Tax due June 30. X Yes See At  | tach        |
|   | g. Name and Address of Curre                 | nt Registered A                       | Agent             | 11          |   |                       | 10. Name and Address of New Registered Agent   |             |
| LE  | ON, J.E.                                     |                                       |                   | -           | 81  | Name                  |  |             |
|   | 250 W. FLAGLER ST.                           |                                       |                   |             | 22  | Street A              | ddraes (P.O. Box Number is Not Acceptable)   |             |
| 1   | IAMI FL 33174                                |                                       |                   |             | 02  | SIFEET AL             | outess (r.o. box Number is Not Acceptable)   |             |
|   |  |                                       |                   |             | 83  |                       |  |             |
|   |  |                                       |                   |             |   |                       |  |             |
|   |  |                                       |                   |             | 84  | City                  | FI 85 Zip Code   |             |
| 11. Pursuant  | to the provisions of Sections 607.05         | 02 and 607 1508                       | 8. Florida Statut | les, the a  | bove<br>bove  | -named c              |  | istered     |
| i office or i                                       | registered agent, or both, in the Stat       | e of Florida, Suc                     | :h change was :   | authorize   | d by  | the corpo             | pration's board of directors. I hereby accept the appointment as regist  | tered       |
| agentia   | am tamiliar with, and accept the obili       | gations of, Section                   | on 607.0505, FI   | orida Sta   | เบเอร   | •                     |  |             |
| SIGNATURE   | Florable broad or public toping of the treet | and and title if are lead             | tdo (NO)          | E Banistara | d Ago   | nt signaturo re       | equited when reinstation)  DATE  |             |
| 12.   |  | ·                                     | (1401             | _           | ~ ∪Pol  | a arganization of the | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN   | 12          |
| TITLE   | D  | to one or one                         | DELETE            | _           | TLE   |                       |  | Addition    |
| NAME  | TANCER, EDWARD F                             |                                       | _                 |             |   | 7                     | TANCER, EDWARD F   |             |
| STREET ADDRESS                                      | 11760 US HWY. 1, STE. 60                     | n                                     |                   |             |   | - 1                   |  |             |
| 1   | N. PALM BEACH FL 33408                       | •                                     |                   |             |   |                       |  |             |
| CITY-ST-ZIP<br>TITLE                                | 11. I ADM DEACHT E SOTO                      |                                       | DELETE            |             |   |                       | Change K   | Addition    |
|   |  |                                       |                   |             |   |                       |  | 7100(101)   |
| NAME  |  |                                       |                   |             |   | ـ ا                   | 1760 US HIGHWAY ONE SUITE 600  |             |
| STREET ADDRESS                                      | ]  |                                       |                   |             |   |                       |  |             |
| CITY-ST-ZIP   |  |                                       | T DELEVE          |             | ITY-S   |                       | ORTH PALM BEACH FL 33408   | A alabita a |
| TITLE   | İ  |                                       | DELETE            | 3.1 TI      |   | -                     |  | Addition    |
| NAME  |  |                                       |                   | 3.2 N       |   |                       | LEIGHTON, MICHAEL L  |             |
| STREET ADDRESS                                      |  |                                       |                   | 3.3 S       | TREET.  |                       | 11760 US HIGHWAY ONE SUITE 600   |             |
| CITY-ST-ZIP   |  |                                       |                   |             | ITY-S   | 1- ZIP N              | ORTH PALM BEACH FL 33408   |             |
| TITLE   |  |                                       | ☐ DELETE          | 4,1 T(      | TLE   |                       |  | Addition    |
| NAME  |  |                                       |                   | 4.21        | AME   | S                     | SAMIL, DILEK L   |             |
| STREET ADDRESS                                      | İ  |                                       |                   | 4.3 S       | TREET.  | address 7             | 700 UNIVERSE   |             |
| CITY-ST-ZIP   |  |                                       |                   | 4.4 C       | ITY-S1  |                       | IUNO BEACH FL 33408  |             |
| TITLE   |  |                                       | DELETE            | 5.1 Tr      | TLE   | S                     |  | Addition    |
| NAME  |  |                                       |                   | 5.2 N       | AME   | k                     | COYLE, DENNIS P  |             |
| STREET ADDRESS                                      |  |                                       |                   | 5.3 S       | TREET   |                       | 700 UNIVERSE   |             |
| CITY-ST-ZIP   |  |                                       |                   |             | ITY-SI  | ľ                     | UNO BEACH FL 33408   |             |
| TITLE   |  |                                       | DELETE            | 6.17        |   |                       | AS Change XX   | Addition    |
| 1   |  |                                       |                   | 6.2 N       |   | Γ.                    | <del>-</del> ·   |             |
| NAME  |  |                                       |                   |             |   |                       | SAMIL, DILEK L   |             |
| STREET ADDRESS                                      |  |                                       | $\sim$            |             |   |                       | 700 UNIVERSE   |             |
| CITY-ST-ZIP   | 1  |                                       | ( )               | 6.4 C       | ITY-S   | I-ZIP                 | JUNO BEACH FL 33408  |             |
|   |  | 1 11 1 610                            |                   |             |   |                       | t in Section 119 07(3)(i) Florida Statutes. I further certify that the infor   |             |

accurate and that my signature shall have the same legal effect as if made under oath; that I am an to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

2/18/98 (561)694-4644