Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90157 033 ***150.00

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

DOCUMENT # P9700081905 1. Corporation Name

ARONI (G.P.), INC-

Principal Place of Business Mailing Address 6767 NW 74TH AVE 6767 NW 74TH AVE #1506 #1506 DO NOT WRITE IN THIS SPACE MIAMI FL 30166 **MIAMI FL 33166** 3. Date Incorporated or Qualifed 09/15/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0787742 Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certifcate of Status Desired NO Suite # Fee Recuired NO Suite 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Country Zip Cour try 8. This corporation owes the current year intangible Personal Property Tax. 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Elena BEN-TOU ALVARADO, MIGDALIA Street Acdress (P.O. Box Number is Not Acceptable) 82 6767 NW 74TH AVE JW 74 AVENUE #1506 83 MIAMI FL 33166 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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of circutors. I hereby accept the appointment as registered agent. I am familiar with and at captine obligations of, Section 607.0505, Florida Statutes.

SIGNATURE 4 SIGNATURE ne of registered agent and title if applicable (NOT 3: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE 1.1 TITLE ☐ Change TITLE NAME ROSENBERG, FABIANA NOEMI 1.2 NAME STREET ADDRESS 4747 COLLINS AVE. #1506 13 STREET ADDRESS MIAMI BEACH FL 33140 14 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 21 TITLE TITLE BEN-TOV, ELENA 2.2 NAME NAME STREET ADDRESS 9500 SW 95TH COURT 2.3 STREET ADDRESS **MIAMI FL 33176** 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE TITLE 3.1 TITLE NAME 32 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP

6.4 CITY-ST-ZIP 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 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 attack man address, with all other like empowered.

41 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

61 TITLE

62 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

63 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

☐ DELETE

☐ DELETE

305-863-0727

Change

Change

Change

☐ Addition

☐ Addition

Addition

CR2E034 (11/98)