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FILED
Apr 21 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000084221 (5)

1. Corporation Name

LUICARPA INVESTMENTS (USA), INC.



Principal Place of Business

P O BOX 1650
WINDEMERE FL 34786-1650

Mailing Address

P O BOX 1650
WINDEMERE FL 34786-1650

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 5900 CASA DEL REY CIR

Suite, Apt. #, etc.

22 City & State

23 ORLANDO FL

24 32809 25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

3. Date Incorporated or Qualified

09/30/1997

4. FEI Number

59-3470554

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

M & W AGENTS INC
2101 CORPORATE BLVD STE 216
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name JORGE L. ORCHILLES

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

83 5900 CASA DEL REY CIR

84 City ORLANDO

FL

85 Zip Code 32809

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 *Jorge L. Orchilles* JORGE L. ORCHILLES SECRETARY 4/13/98

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME ORCHILLES, FRANCISCO JR
STREET ADDRESS 5900 CASA DEL RAY CIR
CITY-ST-ZIP ORLANDO FL 32809

TITLE D ☐ DELETE

NAME ORCHILLES, JORGE SCO L
STREET ADDRESS 5900 CASA DEL RAY CIR
CITY-ST-ZIP ORLANDO FL 32809

TITLE D ☐ DELETE

NAME ORCHILLES, JUAN C
STREET ADDRESS 5900 CASA DEL RAY CIR
CITY-ST-ZIP ORLANDO FL 32809

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

11 TITLE DP ☒ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE DVS ☒ Change ☐ Addition

22 NAME JORGE L. ORCHILLES

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE DVT ☒ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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 attachment with an address.

SIGNATURE *Jorge L. Orchilles* JORGE L. ORCHILLES 4/13/98

CR2E034 (10/97)