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 # P97000096521 (4)

AIG CAPITAL CORP.

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1241 S.W. 20TH STREET 1241 S.W. 20TH STREET MIAMI FL 33145 MIAMI FL 33145 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/05/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name KURTZ, RON BRADLEY 2000 **\$O**UTH DIXIE HIGHWAY Street Address (P.O. Box Number is Not Acceptable) SUITE 200 83 **COCONUT GROVE FL 33133** 84 City Zip Code 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 agen; and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Change Addition 11 TITLE **BUENO, ALBERT** NAME 1.2 NAME 1241 S.W. 20TH STREET STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33145 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 21 TITLE NAME 22 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP ☐ Change DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Channe Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-St-ZiP DELETE TITLE 6.1 TITLE ☐ Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 of 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 or all attributes that my name address.

- Albart Burn

4/22/18 /20)658-792