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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000100368 (4)

CONSULTORES YTURRALDE & ASSOCIATES, INC.

Principal Place of Business Mailing Address 10240 SW 56TH ST. SUITE 115 10240 SW 56TH ST. SUITE 115 MIAMI FL 33165 MIAMI FL 33165 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/20/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-079864 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 30 Personal Property Tax due June 30. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ITURRALDE, LUIS 15102 SW 149TH COURT Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33196** 83 84 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 agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. PTD DELETE 1.1 TITLE ☐ Change ☐ Addition TITLE NAME **ITURRALDE. DANIEL** 1.2 NAME 15102 SW 149TH COURT STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33196** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE **VPSD** Change Addition TITLE 2.1 TITLE **ITURRALDE, LUIS** NAME 2.2 NAME 15102 SW 149TH COURT STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33196** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change 3.1 TITLE Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby 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 is a 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 an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

04/09/98 (

☐ Change

Addition

72E034 (10/97)

**FILED** 

Apr 23 1998 8:00am

Secretary of State