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FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90284 046 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

* 5 4 0 0 2 8 *
540028 - 90284 - 46

DOCUMENT # P98000007268

Corporation Name

THE AMERICAS REAL ESTATE INVESTMENTS INC.

Principal Place of Business	Mailing Address
77 PARK AVENUE SUITE 3C NEW YORK NY 10016	77 PARK AVENUE SUITE 3C NEW YORK NY 10016

DO NOT WRITE IN THIS SPACE

Principal Place of Business	2a. Mailing Address
CDAD. DE LA PAZ 219	28
Suite, Apt. #, etc.	Suite, Apt. #, etc.
2 A	27
City & State	City & State
CAPITAL FEDERAL	28
Zip / Country	Zip / Country
1426 / ARGENTINA	29 / 30

3. Date Incorporated or Qualified: 01 | 23 | 1998

4. FEI Number: N/A — 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 the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LEXIS DOCUMENT SERVICES, INC
3953 NW KELLEY RD
TALLAHASSEE FL 32311

10. Name and Address of New Registered Agent

81 Name

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

83

84 City — FL — 85 Zip Code

Pursuant to the provisions of Sections 607.0302 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: Required when signature required above.) Date

OFFICERS AND DIRECTORS

DELETE

ST-ZIP

DELETE

ST-ZIP

DELETE

ST-ZIP

DELETE

ADDRESS
ST-ZIP

DELETE

ADDRESS
ST-ZIP

DELETE

ADDRESS
ST-ZIP

12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	DIRECTOR	☐ Change ☑ Addition
12 NAME	MÓNICA BORSALINO	
13 STREET ADDRESS	CDAD DE LA PAZ 219 - 2 A	
14 CITY-ST-ZIP	CAPITAL FEDERAL - ARGENTINA (1426)	
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		☐ 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		

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, with all other like empowered.

SIGNATURE: [signature] — NAME AND TITLE OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #