PROFIT CORPORATION

ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED Mar 12, 1999 8:00 am Secretary of State

03-12-1999 90035 007 ***308.75

| | 1999 | DIVISION OF C | CORPORATIONS | | | | |
|--|--|---|----------------------------------|----------------|---|--|-------------------------------------|
| DOCUMENT # P98000077457 TIERRA NUEVA, INC. | | | | | | | - - |
| HENNA | NOEVALING. | | | 1 | i (CAHTSI ILA IBIBI IBIRI GRISI Saini Maisi Ass | er (48 1) (84 1) \$184 | s Artis (BC) engl |
| ļ | | | | | | | |
| Principal Plac | ce of Business | Mailing Address | | | a samera ne tyk thêmî sûlet ûnedê dûşêt ûnelê ûnê | in haan healt ares |) #1651 1 5 #1 1 7# 1 |
| 770 S. CIXIE | 770 S. DIXIE HWY STE. 10 |) 9 | | | | | |
| CORAL GABLE | ES FL 33146 | CORAL GABLES FL 33146 | | | DO NOT WRITE IN TH | IS SPACE | |
| | | | | 3. | Date Incorporated or Qualifed | | |
| 2 2 | · · · · · · · · · · · · · · · · · · · | | | | 09/01/1998 | | |
| 21 Principal i | Place of Business | 2a. Mailing Address | | - * | FEI Number 65 - 0869257 | | plied For |
| Suite, Apt | . #, etc. | Suite, Apt. #, etc. | | — · | | \$8.75 | ek soilogA te |
| 22 | <u></u> | 27 | | 5. | Certificate of Status Desired | Fee Re | |
| City & Sta | | City & State | | 6. | Election Campaign Financing Trust Fund Contribution | S5.00 Added t | |
| Zip | Country | Zip | Country | 6. | This corporation owes the current year le | | |
| 24 | 9. Name and Address of Curren | | 30 | | Personal Property Tax. Name and Address of New Registerer | | □No |
| | | | 81 Nam | | House and Addings of Hos Assistant | 2 Miles IX | |
| KLEIN, BRENT D 801 BRICKELL AVE., STE. 1901 | | | | et Address (P | O. Box Number is Not Acceptable) | | |
| | | <u>L</u> l | | | | | |
| MIAMI FL 33131 | | | 83 | | | |] |
| | | | 84 City | | F | 85 Zip C | ode |
| 11. Pursuant | to the provisions of Sections 607.0502 | and 607.1508, Florida Statutes | s, the above-name | ed corporation | submits this statement for the purpose of | f changing its | registered |
| agent. I a | registered agent, or both, in the State of im familiar with, and accept the obligat | of Florida, Such change was actions of, Section 607.0505, Flori | monzed by the co da Statutes. | rporation s bo | submits this statement for the purpose of and of directors. I hereby accept the appoint | an, za triemink | jistered |
| SIGNATURE | Signature, typed or printed name of registered agent | and the females and a second | Registered Agent signatur | :: | | | |
| 12. | OFFICERS AND | | 13. | | DOITIONS/CHANGES TO OFFICERS A | ND DIRECTOR | RS IN 12 |
| TITLE | D | ☐ DELETE | 1.1 TITLE | | | [] Change | Addition |
| NAME | DEL RIVERO, EDUARDO | | 1.2 NAME | | • | : | 1 |
| STREET ADDRESS | 770 S. DIXIE HWY., STE. 109 CORAL GABLES FL 33146 | | 1.3 STREET ADDRES | × | | | 1 |
| TITLE | D | DELETE | 1.4 CITY-ST-ZIP | | | [] Change | Addition |
| NAME | Messianu, Luis Migu e l | | 2.2 NAME | 1 | | - 0.45.90 | |
| STREET ADURESS | 770 S. DIXIE HWY., STE. 109 | | 23 STREET ADDRES | s | | | - 1 |
| CITY-ST-ZIF | CORAL GABLES FL 33148 | | 2.4 CTY-ST-ZIP | <u> </u> | <u> </u> | | |
| TITLE | D Palma, Olga | ☐ DELETE | 3.1 TITLE | | • | Change | ☐ Addition |
| NAME STREET ADDRESS | 770 S. DIXIE HWY., STE. 109 | | 3.2 NAME 33 STREET ADDRES | <u></u> | - | • | Ì |
| CITY-ST-ZIP | CORAL GABLES FL 33146 | | 3.4. CITY-ST-ZIP | ~ | | | |
| TITLE | <u> </u> | ☐ DELETE | 4.1 TITLE | | | Change | Addition |
| NAME | | | 4. 2 NAME | | | : | 1 |
| STREET ADCRESS CITY-ST-ZIP | | | 4.3 STREET ADDRESS | s | • | | . 1 |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | ☐ Change | Addition |
| NAME | | | 5.2 NAME | | | . :. د.سان | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | s | • | , | |
| CTTY-ST-ZP | | | 5.4 CITY-ST-ZIP | <u> </u> | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE 6.2 NAME | 1 | | Change | Addition |
| NAME STREET ADD-RESS | | İ | 6.3 STREET ADDRESS | s | | | |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | | • | - |

14. I hersby 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 13 if changes, or proportion or the corporation or the receiver with an extress, with all other like empowered.

SIGNATURE: