

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

FILED

Feb 04 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S07831 (8)

1. Corporation Name

ALEXANDER H. FINANCE COMPANY

Principal Place of Business

C/O KIRKPATRICK & LOCKHART
9300 NW 58 ST
MIAMI FL 33178
US

Mailing Address

C/O KIRKPATRICK & LOCKHART
9300 NW 58 ST
MIAMI FL 33178-1614
US3. Date Incorporated or Qualified
10/22/19903a. Date of Last Report
04/30/1996

4. FEI Number

65-0224590

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

BINGHAM, J. REID
C/O KIRKPATRICK & LOCKHART
201 S. BISCAYNE BLVD., SUITE 2000
MIAMI FL 33131

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

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)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME MARTINELLI, GUIDO
STREET ADDRESS 9300 NW 58 ST
CITY - ST - ZIP MIAMI FL ☐ DELETETITLE D
NAME MARINAKYS, JUAN C
STREET ADDRESS 9300 NW 58 ST
CITY - ST - ZIP MIAMI FL ☐ DELETETITLE DC
NAME GARCIA, AUGUSTO
STREET ADDRESS 3105 NW 79TH AVENUE
CITY - ST - ZIP MIAMI FL ☐ DELETETITLE MS
NAME QUANT, EDUARDO
STREET ADDRESS 9300 NW 58 STREET, SUITE #209
CITY - ST - ZIP MIAMI FL ☒ DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETETITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE MS
1.2 NAME MANUEL COHEN
1.3 STREET ADDRESS 9300 N.W. 58 Street
1.4 CITY - ST - ZIP Miami, Fl. 33178 ☐ Change ☒ Addition2.1 TITLE V
2.2 NAME CHRISTOPHE FROCHAUX
2.3 STREET ADDRESS 9300 N.W. 58 STREET
2.4 CITY - ST - ZIP Miami, Fl. 33178 ☐ Change ☒ Addition3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP ☐ Change ☐ Addition4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP ☐ Change ☐ Addition5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP ☐ Change ☐ Addition6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP ☐ Change ☐ Addition

14. I do 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:

MANUEL COHEN

1/23/97

(305) 593 5302

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)