

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

**FILED**  
**Oct 05 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # S46491**

**(4)**

1. Corporation Name  
**HUMBERTO BRENES, INC.**



Principal Place of Business

Mailing Address

201 S BISCAYNE BLVD  
 SUITE 1402  
 MIAMI FL 33131

201 S BISCAYNE BLVD  
 SUITE 1402  
 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 **One Southeast Third Avenue**  
 Suite, Apt. #, etc.

26 **One Southeast Third Avenue**  
 Suite, Apt. #, etc.

22 **2200 SunTrust Center**  
 City & State

27 **2200 SunTrust Center**  
 City & State

23 **Miami, Florida**

28 **Miami, Florida**

24 Zip **33131** Country **USA**

29 Zip **33131** Country **USA**

3. Date Incorporated or Qualified

**04/17/1991**

4. FEI Number

**65-0255304**

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 or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

**MACAULEY, ROBERT B.**  
 201 S BISCAYNE BLVD  
 SUITE 1402  
 MIAMI FL 33131

81 Name

**MACAULEY, ROBERT B.**

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

**MITRANI, RYNOR, ADAMSKY, MACAULEY & ZORRILLA, P.A.**

83 City

**One Southeast Third Avenue #2200**

84 Zip Code

**Miami**

**FL**

**33131**

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

*Robert B. Macaulay*

**9/28/98**

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
	DPS	BRENES, HUMBERTO	201 S BISCAYNE BLVD 1402	MIAMI FL	<input type="checkbox"/>
	AS	MACAULEY, ROBERT B.	201 S. BISCAYNE BLD 1402	MIAMI FL	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

13.	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
	DPS	BRENES, HUMBERTO	One Southeast Third Avenue #2200	Miami, FL 33131	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	AS	MACAULEY, ROBERT B.	One Southeast Third Avenue #2200	Miami FL 33131	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 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:

*Robert B. Macaulay* Asst Sec 9/28/98 305-358-0000

CR2E034 (10/97)