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

Block 12 or Block 13 if clyanged, or on an attachment with an address

Jun 11 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1**9**98 DOCUMENT # S66400 (0) FLORENCE INVESTMENT INC. Principal Place of Business Mailing Address 280 BAL CROSS DR 280 BAL CROSS DR. BAL HARBOUR FL 33154 BAL HARBOUR FL 33154 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/16/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0339082 Not Applicable 26 Suite, 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 Zip Z(p)Country Country 8. This corporation owes or has paid the current year Intangible □ No 24 25 Personal Property Tax due June 30. 29 30 Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent "AGUILERA, GUIDO A. 81 815 PONCE DE LEON BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 83 84 City Zip Code 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Hagistered Agent signature required when reinstating) Signature, typical or pumbed name of responents agent and title if applicable 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Change Addition DELETE TITLE 1.1 TO UE DE PUEYO, FLORENCIA R. NAME 1.2 NAME CR2E034 **CALLE SAN FRANCISCO** STREET ADDRESS 1.3 \$TREET ADDRESS CARACAS, VENEZUELA CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE ALEJANDRO, PUEYO RUIZ NAME 2.2 NAME CALLE SAN FRANCISCO STREET ADDRESS 2 3 STREET ADDRESS CARACAS VE CITY-ST-ZIP 2.4 CHY - S1 - ZIF DELETE Change Addition TITLE 3 1 TITUE ROSA MARIA, PUEYO RUIZ NAME 3.2 NAME CALLE SAN FRANCISCO STREET ADORESS 3.3 STREET ADDRESS CARACAS VE CITY-ST-ZIP 3.4 CITY-ST-ZIP TOTLE DULFIE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C(TY - ST - Z)P DELFIE Addition 5.1 1111.8 Change TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADORESS 6.4 CITY - S1 - ZIP CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Socion 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

Floracia & a flores 1/2/98