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PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

2600 SW 3RD AVE

CITY - ST - ZIP

SIGNATURE:

14. I hereby certify that the information supplied windicated on this annual report or supplemental officer or director of the corporation or the receiblock 12 or Block 13 if changed, or on an attal.

S73304

(5)

Mailing Address

2600 SW 3RD AVE

DELIA FIALLO PRODUCTIONS, INC.

FILED Jan 15 1998 8:00am Secretary of State



SUITE 801 SUITE 801 DO NOT WRITE IN THIS SPACE MIAMI FL 33129 MIAMI FL 33129 3. Date Incorporated or Qualified 08/14/1991 4. FE! Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 65-0276744 21 26 Suite. Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes Personal Property Tax due June 30. 24 25 29 30 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ROSENFELD. MIGUEL 2600 SW 3RD AVE Street Address (P.O. Box Number is Not Acceptable) SUITE 801 83 MIAMI FL 33129 City Zip Code 84 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. 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. DELETE 1.1 TITLE Change Addition TITLE PTD 1.2 NAME FIALLO, DELIA NAME 450 SW 19TH RD 1.3 STREET ADDRESS. STREET ADDRESS MIAMI FL CITY - ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE Change VSD 2.1 TITLE TITLE PASCUAL, BERNARDO 2.2 NAME NAME STREET ADDRESS 450 SW 19TH RD 2.3 STREET ADDRESS MIAM! FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 3.1 TITLE TITLE ROSENFELD, MIGUEL 3.2 NAME NAME 2600 SW 3RD AVE SUITE 801 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE Addition 6.1 TITLE TITLE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

IFMIGUEL Rosenfeld

filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information after the same legal effect as if made under oath; that I am an trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in with an address.

305/285 7811