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

Feb 25 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V07773 (7) REIZONZ CORPORATION Principal Place of Business Mailing Address C/O PACKMAN. NEUWAHL C/O PACKMAN. NEUWAHL 1500 SAN REMO AVENUE. SUITE 125 CORAL GABLES FL 33146 1500 SAN REMO AVENUE. SUITE 125 DO NOT WRITE IN THIS SPACE **CORAL GABLES FL 33146** 3. Date Incorporated or Qualified 01/21/1992 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-3458701 21 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip Country This corporation owes or has paid the current year Intaggible 24 25 29 30 Personal Property Tax due June 30. Yes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GLINSKY, MICHAEL 2655 LEJEUNE ROAD Street Address (P.O. Box Number is Not Acceptable) 82 **SUITE 1111** 83 **CORAL GABLES FL 33134** 84 City Zip Code 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 Statutes was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE INCITE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition TITLE REIFER, EDUARDO 1.2 NAME NAME CR2E034 PLAZA COLONIAL ESCAZU STREET ADORESS 1.3 STREET ADDRESS SAN JOSE, COSTA RICA 1.4 CITY-ST-7IP CITY-ST-ZIP DELFTE DVP 2.1 TITLE Change Addition TITLE REIFER, JORGE NAME 2 2 NAME CALLE LANG, SABANA SUR STREET ADDRESS 2.3 STREET ADDRESS SAN JOSE, COSTA RICA CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TrTLE REIFER, MARIO NAME 3.2 NAME SABANA NORTE, BLVD ICE STREET ADDRESS 3.3 STREET ADDRESS SAN JOSE, COSTA RICA CITY-ST-ZIP 3 4. CiTY-ST-ZiP TITLE DELETE 41 THUE Change Addition REIFER, ALBERTO NAME 4. 2 NAME CARRETERA PRINCIPAL PAVAS STREET ADDRESS 4.3 STREET ADDRESS SAN JOSE, COSTA RICA 4 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP ___ Addition DELETE Change THLE 6.1 TITLE

6.2 NAME

14. Thereby 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 trustree 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.

fue established

6.3 STREET ADORESS 6.4 CITY-ST-ZIP

4/700 / 1998

NAME STREET ADDRESS

SIGNATURE:

FILED