

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

FILED
Apr 29 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 # V37622

(0)

1. Corporation Name

NORONHA & ASSOCIATES, P.A.



Principal Place of Business

1221 BRICKELL AVE
SUITE 1040
MIAMI FL 33131

Mailing Address

1221 BRICKELL AVE
SUITE 1040
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/20/1992

4. FEI Number

65-0381207

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

2. Principal Place of Business

2a. Mailing Address

21 1221 BRICKELL AVE.

26 1221 BRICKELL AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Ste 1470

27 Ste 1470

23 City & State
Miami, FL.

28 City & State
Miami, FL.

24 Zip
33131

25 Country
U.S.

29 Zip
33131

30 Country
U.S.

9. Name and Address of Current Registered Agent

THOME, LILIAN
1221 BRICKELL AV.
SUITE 1040
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
CANTUARIA, ANA LUCIA

82 Street Address (P.O. Box Number is Not Acceptable)
1221 BRICKELL AVENUE

83 SUITE 1470

84 City
MIAMI

85 Zip Code
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

Alexandra
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

04/24/98

12. OFFICERS AND DIRECTORS

TITLE D
NAME FILIPPOZZI, ELIANA M. J.
STREET ADDRESS 1221 BRICKELL AVENUE, SUITE 1040
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE D
NAME GOYOS, DURVAL D JR
STREET ADDRESS 1221 BRICKELL AVENUE - 1040
CITY-ST-ZIP MIAMI FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

04/24/98 (305) 372-0844

CR2E034 (10/97)