FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAR 30 AM 9:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V66493

1. Corporation Name
ALGHERO INVESTMENTS, INC.

Principal Place of Business / Mailing Address
200 S.E. First Street (PH)
Miami, FL 33131

500001445085
-03/31/95--01058--020
****200.00 ****200.00
DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 9/25/92
3a. Date of Last Report: 2/8/94

2. Principal Place of Business
21 200 S. Biscayne Blvd.
Suite, Apt. #, etc.: 22 Suite 4800
City & State: 23 Miami, FL
Zip: 24 33131 Country: 25

2a. Mailing Address
26 200 S. Biscayne Blvd.
Suite, Apt. #, etc.: 27 Suite 4800
City & State: 28 Miami, FL
Zip: 29 33131 Country: 30

4. FEI Number: 65-0364874 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
Peninsula Registered Agents, Inc.
200 S.E. First Street (PH)
Miami, Florida 33131

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 200 S. Biscayne Blvd. (#4800)
83
84 City FL 85 Zip Code

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 mandatory) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/P Del Dago, Rosa	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☐ Addition 200 S. Biscayne Blvd. (4800) Miami, FL 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/V Del Dago, Carmen	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition 200 S. Biscayne Blvd. (#4800) Miami, FL 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/S Maruri, Angel	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition 200 S. Biscayne Blvd.(#4800) Miami, FL 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/T Osoro, Alberto	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition 200 S. Biscayne Blvd. (#4800) Miami, FL 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Del Dago, Manuel	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition 200 S. Biscayne Blvd. (#4800) Miami, FL 33131
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition 3/30/95 MB

14. I/We hereby certify that the information supplied with this filing is voluntarily furnished and 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: Carmen Del Dago 3-23-95
SIGNATURE AND TITLE OR PRINTED NAME OF RESIDENT OR AUTHORIZED OFFICER OR AGENT — Date — Telephone Number #