

DOCUMENT # F99000003824

1. Entity Name

AMATO INTERNATIONAL INCORPORATED

FILED
Jan 29, 2000 8:00 am
Secretary of State

01-29-2000 90013 008 \*\*\*150.00

Principal Place of Business: 30 VESEY STREET, SUITE 1803 NEW YORK NY 10007
Mailing Address: 30 VESEY STREET, SUITE 1803 NEW YORK NY 10007-2914

2. Principal Place of Business: 407 LINCOLN ROAD, SUITE 12C
3. Mailing Address: 407 LINCOLN ROAD, SUITE 12C

City & State: MIAMI BEACH, FL
Zip: 33139
Country: USA



DO NOT WRITE IN THIS SPACE

4. FEI Number: 13-5542688
Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TOUZARD, ANTHONY
407 LINCOLN ROAD, SUITE 12C
MIAMI BEACH FL 33139

7. Name and Address of New Registered Agent

Name:
Street Address (P.O. Box Number is Not Acceptable):
City: FL Zip Code:

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Table with 2 columns: OFFICERS AND DIRECTORS. Rows include: TOUZARD, CLAUDETTE (78 BLVD. LAMBERMONT BRUSSELS 1030 BELGIUM), TOUZARD, JEAN-LOUP (468 ROTE DU GOLF LUBUMBASHI, DEM. REP. OF CONGO), TOUZARD, ANTHONY (1061 MICHIGAN AVENUE, APT. 1 MIAMI BEACH FL 33139), SCHNABEL, ARMAND (230 W 79TH STREET NEW YORK NY 10024).

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. Includes checkboxes for Change and Addition.

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ANTHONY TOUZARD

01.24.00

305-674 1001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #