05-06-1999 90231 042 \*\*\*150.00

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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # H06228

1. Corporation Name

Principal Place of Business

E.D.R. INTERNATIONAL, INC.

| 3351 SW 110TH<br>MIAMI FL 33165<br>US              |   | 3351 SW<br>Miami Fi<br>US           | 110TH COURT<br>_ 33165                   |                        |                 |              | 3.       | DO NOT WI<br>Date Incorporated or Qualife<br>06/04/1984 | RITE IN THIS     | SPACE                          |                  |  |
|--|---|-------------------------------------|--|------------------------|-----------------|--------------|----------|---|------------------|--------------------------------|------------------|--|
| 2. Principal Place of Business 2a. Mailing Address |   |                                     |  |                        |                 |              |          | FEI Number  |                  |                                | Applied For      |  |
| 21   |   | 26                                  | 26                                       |                        |                 |              |          | 59-2435403  |                  |                                | Not Applicable   |  |
| Suite, Apt.  | #, etc.   | Suite                               | Suite, Apt. #, etc.                      |                        |                 |              | 5.       | Certifcate of Status Desired                            |                  | \$8.75 Additional Fee Required |                  |  |
| City & State                                       | )   | City                                | City & State                             |                        |                 |              | 6.       | Election Campaign Financin                              | 9 [7]            |                                | <b>00</b> May Be |  |
| 23   |   | 28                                  |  |                        |                 |              |          | Trust Fund Contribution                                 |                  | Add                            | ed to Fees       |  |
| Zip  | Country Zip   |                                     |  | Country                |                 |              | 8.       | This corporation owes the cu                            | irrent year Inti | _                              | A                |  |
| 24   | 25  | 29                                  |  | 30                     |                 |              |          | Personal Property Tax.                                  | Desistend        | ∐ Yes                          | Thub             |  |
|  | 9. Name and Address of Curre  | nt Registered                       | Agent                                    |                        | 81              | Name         | 10.      | Name and Address of New                                 | Registered       | 4gent                          |                  |  |
| DEL RIEGO, EDUARDO                                 |   |                                     |  |                        | 81              | Name         |          |   |                  |                                |                  |  |
|  | SW 110 COURT  |                                     |  |                        |                 | Street Add   | iress (P | P.O. Box Number is Not Accept                           | otable)          |                                |                  |  |
| ,  |   |                                     |  |                        |                 |              |          |   |                  |                                |                  |  |
| MIAN   | 11 FL 33165   |                                     |  |                        |                 | City         |          |   |                  | 85 Z                           | Zip Code         |  |
|  |   |                                     |  |                        | 84              | •            |          |   | <u>FL</u>        |                                |                  |  |
| office or re<br>agent. I ar<br>SIGNATURE           | to the provisions of Sections 607.05<br>agistered agent, or both, in the State<br>in familiar with, and accept the obligations. | e of Florida. Su<br>ations of, Sect | ich change was au<br>ion 607.0505, Flori | ithorized<br>ida Stati | l by t<br>utes. | the corporat | ion's bo | oard of directors. I hereby acc                         | ept the appoin   | ntment as                      | s registered     |  |
| 12.  |   | ND DIRECTOR                         |  | 13.                    |                 |              |          | ADDITIONS/CHANGES TO C                                  | FFICERS AN       | D DIREC                        | CTORS IN 12      |  |
| TITLE  | PTD   |                                     | ☐ DELETÉ                                 | 1.1 TfT                | ΊE              |              |          |   |                  | Chan                           | ge               |  |
| NAME   | DEL RIEGO, EDUARDO  |                                     |  | 1.2 NA                 | ME              |              |          |   |                  |                                |                  |  |
| STREET ADDRESS                                     | 3351 SW 110TH COURT   |                                     |  | 1.3 ST                 | REET            | ADDRESS      |          |   |                  |                                |                  |  |
| CITY-ST-ZIP  | MIAMI FL 33165  |                                     |  | 1 4 CF                 | ry-st           | -ZiP         |          |   |                  |                                |                  |  |
| TITLE  |   |                                     | ☐ DELETE                                 | 2.1 TIT                | ſLE             |              |          |   |                  | [] Chan                        | nge              |  |
| NAME   |   |                                     |  | 2.2 NA                 | ME              |              |          |   |                  |                                |                  |  |
| STREET ADDRESS                                     |   |                                     |  | 2.3 ST                 | REET            | ADDRESS      |          |   |                  |                                |                  |  |
| CITY-ST-ZIP  |   |                                     |  | 2.4€                   | TY-S1           | r-zip  -     |          |   |                  |                                |                  |  |
| TITLE  |   |                                     | ☐ DELETE                                 | 3.1 111                | rLE             |              |          |   |                  | Chan                           | nge              |  |
| NAME   |   |                                     |  | 3.2 NA                 | ME              |              |          |   |                  |                                |                  |  |
| STREET ADDRESS                                     |   |                                     |  | 3.3 ST                 | REET            | ADDRESS      |          |   |                  |                                |                  |  |
| CITY-ST-ZIP  |   |                                     |  | 3.4. C                 | TY-\$1          | r-ZIP        |          |   |                  |                                |                  |  |
| TITLE  |   |                                     | ☐ DELETE                                 | 4.1 TI                 | η.Ε             |              |          |   |                  | Chan                           | nge 🗌 Addition   |  |
| NAME   |   |                                     |  | 4. 2 N                 | AME             | -            |          |   |                  |                                |                  |  |
| STREET ADDRESS                                     |   |                                     |  | 4.3 ST                 | REET            | ADDRESS      |          |   |                  |                                |                  |  |
| CITY-ST-ZIP  |   |                                     |  | 4.4 CI                 | TY-ST           | -ZIP         |          |   |                  |                                |                  |  |
| TITLE  |   |                                     | ☐ DELETE                                 | 5.1 TIT                | LE              |              |          |   |                  | Chan                           | nge 🔲 Addition   |  |
| NAME   |   |                                     |  | 5.2 N/                 | ME              |              |          |   |                  |                                |                  |  |
| STREET ADDRESS                                     |   |                                     |  | 5.3 ST                 | REET            | ADDRESS      |          |   |                  |                                |                  |  |
| CMY-ST-ZIP   |   |                                     |  | 5.4 CI                 |                 | -ZIP         |          |   |                  |                                |                  |  |
| TITLE  |   |                                     | ☐ DELETE                                 | 6.1 TD                 | LE              |              |          |   |                  | Chan                           | ige Addition     |  |
|  |   |                                     |  | 62 NA                  | ME              | - 1          |          |   |                  |                                |                  |  |

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, with all other like empowered.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Eduardo Del Riego E OF SIGNING OFFICER OR DIRECTOR

4/28/99 305/470-9697