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Feb 24 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 # K40603 (8)
1. Corporation Name
KRESS INTERNATIONAL, INC.



Principal Place of Business Mailing Address
~~422 N.E. 167 ST., #110~~ ~~422 N.E. 167 ST., #110~~
~~MIAMI FL 33132-2541~~ ~~MIAMI FL 33132-2541~~

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		10/24/1988	
22 City & State		27 City & State		4. FEI Number	
23 Zip Country		28 Zip Country		65-0086077	
24		25		29	
25		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
MARBIN, EVAN R. 48 E. FLAGLER ST., STE. 374 MIAMI FL 33131				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				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 reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	BEREZDIVIN, MOISES	1.2 NAME	
STREET ADDRESS	CEREZO #2, SAN PATRICIO	1.3 STREET ADDRESS	
CITY-ST-ZIP	SAN JUAN PR	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	
NAME	ROK, SERGIO	2.2 NAME	
STREET ADDRESS	48 E FLAGLER ST PH105	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	
NAME	JOSEPH, CLAUDE	3.2 NAME	
STREET ADDRESS	10390 S.W. 63RD CT.	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	
NAME	BEREZDIVIN, MARK	4.2 NAME	
STREET ADDRESS	CEUD. TENERIFE, #702	4.3 STREET ADDRESS	
CITY-ST-ZIP	SANTUCE PR	4.4 CITY-ST-ZIP	
TITLE	VPD	5.1 TITLE	
NAME	LAZOTT, BERNARDO	5.2 NAME	
STREET ADDRESS	COND. TENEVIFE #802	5.3 STREET ADDRESS	
CITY-ST-ZIP	SANTUCE PR	5.4 CITY-ST-ZIP	
TITLE	VPD	6.1 TITLE	
NAME	TUCHMAN, MEDARDO	6.2 NAME	
STREET ADDRESS	CALLE A-D-2	6.3 STREET ADDRESS	
CITY-ST-ZIP	QUAYNABO PR	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 attached sheet with an address.

SIGNATURE

2/18/98

305-358-9249

CR2E034 (10/97)