**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K43738									
r, corporation name									
DRACO INTERNATIONAL BUSINESS CO.						4 200 ( P. 11	:****		(E)
	•	•							
Principal Place	e of Business	Mailing Address						AABU BIBI AABU D	INIC NINIC CONT
12864 BISCAYN	E BLVD	12864 BISCAYNE BLVD.							
STE 333		SUITE 333					<b>-</b>		
N MIAMI FL 331 US	181	n miami FL 33181 Us				3. Date Incorporated or Qu	T WRITE IN THIS	SPACE	
**		00				10/31/1988	idii oo		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	****	Ap	plied For
<u> </u>	85-2	26	<del>-</del>			65-0090053		No	t Applicable
Suite, Apt.	Suite, Apt. #, etc.	, etc.			5. Certifcate of Status Des	ired 🗆	\$8.75		
22 27						5. Certificate of Status Des	#ca 🗀	Fee Re	quired
City & State City & State						<ol><li>6. Election Campaign Fina</li></ol>	·	\$5.00	•
23	28					Trust Fund Contribution		Added t	o Fees
Žip	Country . Zip C					<ol> <li>This corporation owes the Personal Property Tax.</li> </ol>	ne current year In		No
24	25 9. Name and Address of Current		30			10. Name and Address of	New Registered		
<del></del>	5. Hallio and Address of Continu	Trogistered Agent	81	Name	)	10			
VILLAR, FELIPE A				<b>2</b> : 1		(0.0 D. N. J. V. N. A.			
12864 BISCAYNE BLVD STE 333				Street	Addres	ss (P.O. Box Number is Not A	(ссертавіе)		
MIAMI FL 33181			83						
			84	City				85 Zip 0	- ode
			044	City			FI	_	2000
11. Pursuant	s, the above	-named	d corpor	ation submits this statement	for the purpose o	f changing its	registered		
agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	ons of, Section 607.0505, Florid	da Statutes.		Joradon	s board of directors. Thereby	, ассерт те аррс	munem as reg	giatered
SIGNATURE									
	Signature, typed or printed name of registered agent OFFICERS AND			t signature	required v	when reinstating)	DATE	ND DIDECTO	DC IN 42
TITLE	PDS	DELETE	13.		T	ADDITIONS/CHANGES	IO OFFICERS A	☐ Change	Addition
NAME	VILLAR, FELIPE A.		1.2 NAME					- •	_
STREET ADDRESS	ACCOUNT PLANT OF ACC			ADDRE\$S	,				
CITY-ST-ZIP	MIAMI FL	•	1.4 CITY-ST						
TITLE	T	☐ DELETE	2.1 TITLE		_			☐ Change	☐ Addition
NAME	VILLAR, FELIPE A.		2.2 NAME						
STREET ADDRESS	12864-BISCAYNE-BLVD-STE:33	ىيىنىنىسىچە(	23 STREET	ADDRESS					
CITY-ST-ZIP	MIAMI FL		2.4 CITY-S	T-ZIP		-5 -			
TITLE		☐ DELETE	3.1 TITLE					Change	☐ Addition
NAME	•	\ <u>←</u> ←	3.2 NAME						
STREET ADDRESS			3.3 STREET	ADDRESS	3	*			
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	1			Charte	
TITLE		☐ DELETE	4.1 TITLE					Change	Addition
NAME *			4. 2 NAME						
STREET ADDRESS			4.3 STREET						
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST 5.1 TITLE	1-214	+			Change	Addition
NAME			5.2 NAME		1				
STREET ADDRESS			5.3 STREET	ADDRESS	3	<u>~</u>			
CITY-ST-ZIP			5.4 CITY-S1	T-ZIP					
TITLE	<del></del>	☐ DELETE	6.1 TITLE		1			Change	☐ Addition
NAME	1	•	6.2 NAME			١,,			
CTREET ADDRESS			6.3 STREET	ADDRESS	:	,			

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, with all other like empowered.

6.4 CITY-ST-ZIP

**SIGNATURE:** 

STREET ADDRESS

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90196 041 \*\*\*150.00