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May 03, 1999 8:00 am  
Secretary of State

05-03-1999 90074 030 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L59470

1. Corporation Name  
ANCAR INTERNATIONAL, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: % ANA DE INOCENTI, 16921 NW 20 AVE, OPA LOCKA FL 33056  
Mailing Address: % ANA DE INOCENTI, 16921 NW 20 AVE, OPA LOCKA FL 33056

3. Date Incorporated or Qualified: 03/19/1990

2. Principal Place of Business (21) Suite, Apt. #, etc. (22)  
2a. Mailing Address (26) Suite, Apt. #, etc. (27)

4. FEI Number: NOT APPLICABLE  
Applied For: Not Applicable

City & State (23) Zip (24) Country (25)

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

City & State (28) Zip (29) Country (30)

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

9. Name and Address of Current Registered Agent

8. This corporation owes the current year Intangible Personal Property Tax: Yes/No

DE INOCENTI, ANA  
16921 NW 20 AVE  
OPA LOCKA FL 33056

10. Name and Address of New Registered Agent  
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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

Table with 2 columns: OFFICERS AND DIRECTORS (12) and ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (13). Rows include DE INOCENTI, ANA and CARDENA, RENE with fields for Title, Name, Street Address, and City-ST-ZIP.

Table with 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (13) and ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (13). Rows include fields for Title, Name, Street Address, and City-ST-ZIP for various officers.

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.

SIGNATURE: \_\_\_\_\_ DATE: APRIL 20/99 (305) 620-7337

CR2E034 (1/98)