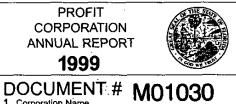
, FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 04, 1999 8:00 am Secretary of State

05-04-1999 90194 041 ***158.75

AFFAIR	INTERNATIONAL, INC.				- 138010471 (11 0010) (1001 00100 (1001	RBJ) BIBII BIBII ASBSI	DIGII BIGO GIBII IBBI
	•						
Principal Plac	e of Business	Mailing Address				BRIL BIRIL RESIL BIRIL	
5445 COLLINS	AVE	5445 COLLINS AVE					
CU9		CU9		DO NOT WRITE	IN THIS SPACE	<i>:</i>	
Miami BCH FL UG	33140	MIAMI BCH FL 33140 US		Date Incorporated or Qualifed	IN THIS SPACE		
004		00			05/24/1984		Į
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26		59-2614252	Ť	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			^	75 Additional	
22		27			J. Certificate of Status Bosined	F6	ee Required
City & Stat	e	City & State			6. Election Campaign Financing		.00 May Be
23		28	0		Trust Fund Contribution	Ac	Ided to Fees
Zip	Country	Zip	Country		8. This corporation owes the curren	t year Intangible Yes	s □No
24	9. Name and Address of Current		30		Personal Property Tax. 10. Name and Address of New Re		
<u> </u>	3. Raine and Address of Current	, Negistered Agent	81	Name	The state of the s	,	
вот 🔭	ana, raul				10 0 D 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
- 8754	I SW 8TH ST.		82	Street Addre	ess (P.O. Box Number is Not Acceptable	e)	
. MIAI	MI FL 33174		83				
			124			loc!	Zip Code
			84	City		FL 85	Zip Code
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute:	s, the above-	named corpo	oration submits this statement for the pu	rpose of changing	ng its registered
office or r	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was aut ions of, Section 607.0505, Flori	thorized by ti da Statutes.	ne corporatio	n's board of directors. I hereby accept	пе арропипени	as registered
SIGNATURE			_				
12.	Signature, typed or printed name of registered agen OFFICERS AN		Registered Agent	signature required	when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRE	CTORS IN 12
TITLE	PST OFFICERS AN	DELETE	1,1 TITLE		700111010101010101010111	☐ Cha	
NAME	FABIUS, DANIEL	<u></u>	1.2 NAME			_	
STREET ADDRESS	2625 COLLINS AVE # 1810		1.3 STREET A				
CITY-ST-ZIP	MIAMI BEACH FL		I I 3 3 I REEL /	ADDRESS I			
TITLE	D			Į.			
NAME		☐ DELETE	1.3 STREET A 1.4 CITY-ST- 2.1 TITLE	Į.		□ Chi	ange Addition
]	. —	☐ DELETE	1.4 CITY-ST-	Į.		☐ Chi	ange Addition
STREET ADDRESS:	FABIUS, DANIEL 2625 COLLINS AVE # 1810	☐ DELETE	1.4 CITY-ST- 2.1 TITLE	ZIP		Chi	ange Addition
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!	FABIUS, DANIEL 2625 COLLINS AVE # 1810	☐ DELETE	1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET /	ZIP AODRESS		□ Ch	
CITY-ST-ZIP	FABIUS, DANIEL 2625 COLLINS AVE # 1810		1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET / 2.4 CITY-ST	ZIP AODRESS			
CITY-ST-ZIP	FABIUS, DANIEL 2625 COLLINS AVE # 1810		1.4 CITY-ST- 2.1 TITLE 2.2 NAME 2.3 STREET A 2.4 CITY-ST 3.1 YITLE	ZIP ADDRESS - ZIP			
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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:

305-866-4922