## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #** 

M16271

MASTER INTERNATIONAL SERVICES, INCORPORATED

(2)

**FILED** Apr 09 1996 8:00 am Secretary of State

Principal Place of Business Mailing Address   13780 S.W. 56TH ST (208) 13780 S.W. 56TH ST (208)   MIAMI FL 33175 MIAMI FL 33175							T I DESENDIST ON THE DELICE ISON THE			ill Stati Divil 1991		
							3. Date Incorporated or Qualified 06/03/1985 04/26/1995					
2. Principal Place of Business				Mailing Address					4. FEt Number		<b>⊢</b> +	Applied For
Suite, Apt. #	# etc		26	Suite, Apt. #, etc.					59-2581950			Not Applicable
22	., 0.0.		27	Cone, ripe. II, etc.					5. Certificate of Status Desired	₩		5 Additional Required
City & State	,			City & State					6. Election Campaign Financing		\$5.0	00 May Be
23			28		-12.41 2.21				Trust Fund Contribution			ed to Fees
Ζ(p 24		Country 25	29	Zip	30	Country	f		8. This corporation has liability for Florida Statutes Yes		tax under s	199.032,
	9. Name	and Address of Curr	1	tered Agent	30	I			10. Name and Address of New R		Agent	
	was in a water an					81	-	Name		<u>¥</u>		
YDROV	O, EDGAR	•				82	╁	Street Addres	ss (P.O. Box Number is Not Acceptab	ole)		
5900 S.	W. 127TH						ļ					
APT. 31						83						
MIAM! F	L 33183					84		City	· · · · · · · · · · · · · · · · · · ·	FI	<b>85</b> Zi	ip Code
f or registere	ed agent, or	ons of Sections 607.05 both, in the State of Flo pt the obligations of, Se	rida, Sucl	i change was author	ized by th	e corp	riai iori	med corporat ation's board	ion submits this statement for the pur of directors. Thereby accept the app	pose of cl	nanging its its registered	registered office d agent. I am
SIGNATURE												
12.	Signature typied	or printed name of registered ag-	ent and the if.	applications (f			nt s	gnator requests		DATE	n Dipoot	000 11.10
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 charged, or on ap attachment with an address.

SIGNATURE:

FOGAR YDROUD-Survey