Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90160 003 ***158.75

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000013091

INTERNATIONAL SUNSHINE COMPANY, INC.

Principal Place of Business Mailing Address						E (MATIME) 110 18111 AIM15 MATE AND FE) 48 111 48 141 1	-	10 10191 2101 1091
2307 DOUGLAS RD 2307 DOUGLAS RD						1			
500		500							
MIAMI FL 33145	i	MIAMI FL 33145			DO NOT WRITE IN THIS SPACE				
US US						3. Date Incorporated or Qualifed			
						02/16/1994			
Principal Pl	ace of Business	2a. Mailing Address			4. <fei number<="" td=""><td></td><td></td><td>pplied For</td></fei>			pplied For	
21		26				65-0472076			lot Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired	×		Additional
22		27							Required
City & State	•	City & State			6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Cour	ıtry		8. This corporation owes the curre	ent year inta		_ \
24	25	29	30			Personal Property Tax.		Yes	No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New R	egistered /	<u>Agent</u>	
41.43	(O. 148) OOM		ļ	81	Name				1
	O, WILSON		1		Street Addr	ress (P.O. Box Number is Not Acceptable)			
	DOUGLAS RD								
500		ſ	83					}	
MIAN	11 FL 33145			04	City			25 75	Code
			j	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 a	when reinstating)	DATE						
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECT	ORS IN 12
TITLE	DPS	☐ DELETE	1.1 TIT	LE				Change	☐ Addition
NAME	ALAYO, WILSON		1.2 NA	ME					
STREET ADDRESS	2307 DOUGLAS RD., #500		1.3 STF	REET	ADDRESS)
CITY-ST-ZIP	MIAMI FL		1.4 CIT	Y-ST	-zip				. /
TITLE	DV	☐ DELETE	2.1 717					Change	Addition
NAME	ALAYO, JUAN		2.2 NA	ME		·			
STREET ADDRESS	2307 DOUGLAS RD., SUITE 500	i	1		ADDRESS				.]
CITY-ST-ZIP	MIAMI FL		2.4 QII						ŀ
TITLE	DV	☐ DELETE	3.1 TITI		1-211			Change	Addition
NAME	ALAYO, JOSE		3.2 NA						_
					ADDRESS				j
STREET ADDRESS	2307 DOUGLAS RD., SUITE 500			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP					J
CITY-ST-ZIP TITLE	MIAMI FL DVT	□ DELETE	4.1 TITI		1-47			. Change	Addition
1	- ·	□ beccit	4.2 NA						
NAME	ALAYO, GEMA				1000000)
STREET ADDRESS	2307 DOUGLAS RD., #500				ADDRESS				{
CITY-ST-ZIP	MIAMI FL	☐ DELETE	4.4 CIT		ZIP			☐ Change	Addition
TITLE	V	L) DELETE	5.1 TITI 5.2 NA					. C∩ange	. C Mountoll
NAME	GONZALEZ, ROBERTO				ADDRESS			•]
STREET ADDRESS	2307 DOUGLAS RD., SUITE 500								}
CITY-ST-ZIP	MIAMI FL		5.4 CIT		1-ZIP				
TITLE		☐ DELETE	6.1 TITI					☐ Change	Addition
NAME			6.2 NA						}
STREET ADDRESS			6.3 STF	REET	ADDRESS				1
CITY-ST-ZIP			6.4 CIT	Y-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.

SIGNATURE: