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

PROFIT CORPORATION **ANNUAL REPORT**



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

POCUMENT # P95000033178 (1)

indicated on this annual report or supplicemental annual report is true and accurat officer or director of the corporation of the receiver or trustee empowered to exec Block 12 or Block 13 if changed, or on an attachment with an address.
CIGNATURE: TO THE STATE OF THE

FILED May 11 1998 8:00am Secretary of State

INTERN	NATIONAL TRADE SERVICES	U.S.A., INC.			#### ### #### #### ###
Principal Place of Business ROSE NW 97TH ST MIAULTE 93186		Mailing Address 8089 NW 67TH ST MIANUEL 33166 US		DO NOT WRITE IN TH	
•				3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		04/27/1995 4. FEI Number	Applied For
1 8331 NW 68 St		26		65-0576316	Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		[27]		Certificate of Status Desired	Fee Required
City & Stat	ami-FL	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Z(p)	Country	8. This corporation owes or has paid the	_ ' _ '
24 351	9. Name and Address of Current	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registere	Yes No
		Registered Agent	81 Name	10. Name and Address of New Registere	o Agent
- KU	IIZ, ALBERTO K. J. 301 N.W. 9TH ST. CIRCLE				
#1			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
	AMI FL 33172		83	11 1900	
******	MII 1 2 3 11 2		94 04 0		las Za Cada
			84 City	li'AMI F	L 85 Zip Code 2 Q
11. Pursuant office or r agent. La	to the provisions of Sections 607.0502 registered agent, or both, in the State im temiliar with, and accept the obliga	and 607.1508, Florida Statu of Florida Such change was tions of Section 607.0505, F	tes, the above-named co authorized by the corpor lorida Statutes.	rporation submits this statement for the purpose ation's board of directors. I hereby accept the a	of changing its registered appointment as registered
SIGNATURE					}
	Signature, typed or printed name of rege teniclasjer		 Registered Agent signature req 13. 	ured when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	18
12.	OFFICERS AND	DELETE		P. D	Change Addition
NAME	RUIZ, ALBERTO J		•		Shange Haddingth
STREET ADDRESS 10301 N.W. 9TH ST. CIRCLE		# 101	1.3 STREET ADDRESS	Ruiz, Alberto T.	
CITY-ST-ZIP	MIAMI FL 33172		1.4 CIBY - S7 - ZIP	MIAMI- FL 3313	a
TITLE	VD	DELETE	2.1 TITLE	V.D	Change Addition
NAME	RUIZ, ANGELA A		22 NAME	RUIZ ANGELA A	,
STREET ADDRESS	10301 N.W. 9TH ST. CIRCLE	# 101		5141 NW 114 CT	
CITY-ST-ZIP	MIAMI FL 33172		2. 4 CITY - ST - ZIP	MIAMI -FL. 3310	48
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		į
CITY-ST-ZIP		DINCIETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		[_] DELETE	4 1 TITLE 4. 2 NAME		C Guange C Madinari
NAME CTOPET ADDOCCE			4.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELE1É	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TALE		Change Addition
NAME			6.2 NAME		ļ
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 CHY-ST-ZIP		
14. Thereby o	certify that the information supplied will	h this filing does not qualify:	or the exemption stated i	n Section 119.07(3)(i), Florida Statutes. I further	certify that the information

ite and that my signalure shall have the same legal effect as if made under oath; that I am an acute this report as required by Chapter 607, Florida Statutes; and that my name appears in

6-29-98