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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Mar 26 1998 8:00am
Secretary of State

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ANN	Secretary of State  1998  DIVISION OF CORPORATIONS					
DOCUMENT # P95000074406 (6) ITS - INTERNATIONAL TRADE SERVICES, INC.				L (REILEN) (FE TRIBI RIVE FOUN SELL ABOUT NELL CONTINUES	BULI BIBIL BLBIL BBILL BLIS LUBS	
Principal Plac	ce of Business	Mailing Address	<del></del>	1 1881/884 119 1810/ 8111/ 8811/ 8811/ 8811/	ifist atats widit matta atts ida)	
8249 NW S6TH ST 8249 NW 36TH ST						
STE 102   STE 102   MIAMI FL 33166   MIAMI FL 33166				DO NOT WRITE IN THIS	S SPACE	
us us				3. Date Incorporated or Qualified		
2. Principal I	Place of Business	2a. Mailing Address		09/25/1995 4. FEI Number	Applied For	
21		26 P. O. BO	x 520096	65-0616128	Not Applicable	
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 City & Sta	la	City & State	<del> </del>	6 Floation Compains Floation	Fee Required	
23		28 MIAMI	- FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
[ Zip	Country	33152	Country	8. This corporation owes or has paid the c	urrent year Intangible	
24	25 9. Name and Address of Currer	1201	30 U.S.A.	Personal Property Tax due June 30.  10. Name and Address of New Registere	Yes lo	
7/	AMITH, PAULO C	The state of the s	81 Name	10. Intille and Realises of their inglisters.	2 Fegun	
	324 SW 148TH CT		82 Street Addre	ess (P.O. Rox Number is Not Accentable)	<del></del>	
MIAMI FL 33183				_		
			83		1	
			84 City	F	85 Zip Code	
11. Pursuant	to the provisions of Sections 607.050	)2 and 607.1508, Florida Statu	ites, the above-named corp	<b>1</b> 1		
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 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						
12.	Bignature, typed or printed name of registered app	and and wife of expirications. (NO ID DIRECTORS	TE: Registered Agent signature require  13.	ADDITIONS/CHANGES TO OFFICERS AT	ND DIRECTORS IN 12	
TITLE	PSDT	DELETE	1.4 TIPLE	7,00,110,10,111,110,110,110,110,110,110,	Change Addition	
NAME	ZAMITH, PAULO		1.2 NAME		[	
STREET ADDRESS	5824 SW 146TH CT		1.3 STREET ADDRESS		Į!	
CITY-ST-ZIP	MIAMI FL 33183		1.4 CITY-ST-ZIP	····		
TITLE	}	DELETE	2.1 TITLE		Change	
NAME STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP		ł	
TITLE		OELETE.	3.1 TITLE		Change Addition	
NAME	]		3.2 NAME		}	
STREET ADDRESS			3.3 STREET ADDRESS		ì	
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STREET ADDRESS	}		4.3 STREET ADDRESS		Ì	
CITY-ST-ZIP	<b>{</b>		4.4 CITY-ST-ZIP			
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NAME			. 5.2 NAME		Ì	
STREET ADDRESS			5.3 STREET ADDRESS		<u> </u>	
CITY-ST-ZIP TITLE	<del> </del>	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition	
NAME	{	hand over 14	6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS		\$	
CITY-ST-ZIP			6.4 CITY-ST-ZIP		<u> </u>	
14. I hereby	certify that the information supplied w	ith this filing does not qualify	for the exemption stated in t	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.

SIGNATURE: PLOUTE OR PRINTED NAME OF BANING OFFICER OR DIRECTOR