

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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

93 JUN 19 AM 8:39
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P97000105800

1. Corporation Name

INTERNATIONAL TRANSFORMATION, INC.

Principal Place of Business

Mailing Address

**100 LINCOLN RD STE 939
 MIAMI FL 33139**

**100 LINCOLN RD STE 939
 MIAMI FL 33139**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/17/97

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number

65-0800614

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**PANARO, PHILIP A.
 100 LINCOLN RD STE 939
 MIAMI FL 33139**

10. Name and Address of New Registered Agent

81 Name **NO TAX DUE - NO INTANGIBLES**
 82 Street Address (P.O. Box Number is Not Acceptable)
 83 **400002565064**
-06/23/98--01031--006
 84 City *******FL 005 *****50.00**

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE
 NAME **PRESIDENT**
 STREET ADDRESS **PANARO, PHILIP A.**
100 LINCOLN RD STE 939
 CITY-ST-ZIP **MIAMI FL 33139**

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DELETE
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-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.

SIGNATURE:

Phil A. Panaro

PHILIP A. PANARO PRES.

CR2E034 (10/97)

2/19/98

I never received THIS FORM. BY THE TIME I REALIZED I NEEDED TO FILE THIS FORM AND CALLED YOUR OFFICE, THE FORM WAS ALREADY LATE. I AM ENCLOSED A CHECK FOR THE FILING FEE OF \$150⁰⁰ AND ASKING THAT YOU ABATE ANY LATE FEE THAT I MAY HAVE INCURRED.

THANK YOU,