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Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P 95000089401
1. Corporation Name

PETRUS INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

6884 SW 88th ST #C-302
Miami, FL 33156

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 8360 SW 158th ST

26 8360 SW 158th ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Miami, FL

28 Miami, FL

Zip Country

Zip Country

24 33157

25

29 33157

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Pedro P. Correa
8360 SW 158th ST
Miami, FL 33157

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 607.0503, Florida Statutes.

SIGNATURE

P. Correa

4/30/98

(Signature required for principal place of business and mailing address)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.1 NAME Correa, Pedro P.
1.1 STREET ADDRESS 8360 SW 158th ST
1.1 CITY-STATE-ZIP Miami, FL 33157

2.1 TITLE
2.1 NAME
2.1 STREET ADDRESS
2.1 CITY-STATE-ZIP

3.1 TITLE
3.1 NAME
3.1 STREET ADDRESS
3.1 CITY-STATE-ZIP

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5.1 TITLE
5.1 NAME
5.1 STREET ADDRESS
5.1 CITY-STATE-ZIP

6.1 TITLE
6.1 NAME
6.1 STREET ADDRESS
6.1 CITY-STATE-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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:

P. Correa

PEDRO P. CORREA

4/30/98

(305) 373-8808

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034 (10/97)