03251999-90035-031-$70.00-$70.00

NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 25, 1999 8:00 am
Secretary of State
03-25-1999 90035 031 ****70.00

DOCUMENT # N98000003137

1. Corporation Name
MAPET INTERNATIONAL FOUNDATION, INC.

Principal Place of Business
7920 N.W. 166TH STREET
MIAMI LAKES FL 33016

Mailing Address
7920 N.W. 166TH STREET
MIAMI LAKES FL 33016

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 06/02/1998
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0844378 ☑ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☑ $8.75 Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
RIVERA, MARIO P 7920 N.W. 166TH STREET MIAMI LAKES FL 33016	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 617.0502 and 617.1508, 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 617.0503, 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDCE ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	RIVERA, MARIO P	1.2 NAME	
STREET ADDRESS	7920 N.W. 166TH STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL 33016	1.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	DE PEREZ, DAISY T	2.2 NAME	
STREET ADDRESS	7920 N.W. 166TH STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL 33016	2.4 CITY-ST-ZIP	
TITLE	SD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	GARCIA, MANUEL J	3.2 NAME	
STREET ADDRESS	7920 N.W. 166TH STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL 33016	3.4 CITY-ST-ZIP	
TITLE	TD ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	TAPIA, DAISY M	4.2 NAME	
STREET ADDRESS	7920 N.W. 166TH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL 33016	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	GARCIA, ANTONIO P	5.2 NAME	
STREET ADDRESS	7920 N.W. 166TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL 33016	5.4 CITY-ST-ZIP	
TITLE	VD ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	RODRIGUEZ, DAVID R	6.2 NAME	
STREET ADDRESS	7920 N.W. 166TH STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL 33016	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 617, 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: SIGNATURE MARIO P. RIVERA / PRES. 03-22-99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)