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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 351154

1. Corporation Name

AVGR	INTERNATIONAL BUSINESS	S INCORPORATION			
Principal Place	of Business	Mailing Address			
1355 NW 97 AVI MIAMI FL 33172 US		1355 NW 97TH AVE MIAMI FL 33172 US		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	S SPACE
				08/22/1969	A-G-G-
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable
21	4 -4-	Suite, Apt. #, etc.		59-1277701	\$8.75 Additional
Suite, Apt. i	4, etc.	27		5. Certifcate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Ir	
24	25	29 30	<u> </u>	Personal Property Tax.	Yes No
	9. Name and Address of Current	t Registered Agent	04 N	10. Name and Address of New Registered	1 Agent
81 Name					
EVELIO C YEDO SSTO SW GEND ST 10320 S.W. 100 AVE.			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
3310	HFL 89173 MIAMI,	FL 33176	83		
1916-01	11 12 00 110 11111111111111111111111111	,			
			84 City	FI	L 85 Zip Code
COLORO AND COLORO STATES STATES AND ADDRESS AND ADDRES					
11. Pursuant to the provisions of Sections bot 2002 and 607.1302, Florida Statutes, the abovernatives composition 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					
Cognition, types of Financian Control and Dispersion Control and Dis			13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 TITLE	7,55,710,701,7,11,11,000,100	Change Addition
NAME	YEDO, EVELIO C.		1.2 NAME .	 	
STREET ADDRESS	9370 S.W. 02ND ST.		1.3 STREET ADDRESS	0320 S.W. 100 AVE.	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	8120 SW 86 AVE.	
TITLE	VSD	☐ DELETE	2.1 TITLE		Change Addition
NAME	YEDO, RAQUEL M.		2.2 NAME		
STREET ADDRESS	9 370-9.W.: 02ND-0 T.	-	2.3 STREET ADDRESS	8/20 5.00. 86 11-2.	
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP	MIAMI, FL. 33143	Clothan Claddison
TITLE		☐ DELETÉ	3.1 TITLE	•	☐ Change ☐ Addition
NAME			3.2 NAME		1
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-\$T-ZIP		DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		□ vereie	4.1 TITLE		
NAME		•	4. 2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS			4.4 CITY-ST-ZIP		
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	<u></u>	☐ Change ☐ Addition
NAME		_ ·	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		ļ
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE 1		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
070557 4005500	_ '**		6.3 STREET ADDRESS		1

14. hereby certify that the information specified 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 of 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 changes, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP