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

DOCUMENT # 461881

(5)

EDMAR INTERNATIONAL CORP.

FILED Mar 12 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					-{			
-		Mailing Address						
10234 SW 9		10234 SW 9TH TERRACE						
MIAMI FL 33	1174	MIAMI FL 33174			DO NOT WRITE IN THIS S	PACE		
•					3. Date incorporated or Qualified			
					10/13/1974			
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For		
21		[26]			59-1619860	Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional		
22		27			5. Certificate of Status Desired	Fee Required		
City & Stat	le	City & State			6. Election Campaign Financing	\$5.00 May Be		
23		28			Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Country	,	B. This corporation owes or has paid the curre			
24	25		ю			Yes No		
	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered A			
MI	UNOZ, MARCOS A.		81	Name				
	234 SW 9TH TERRACE		82	Stroot Add	Iress (P.O. Box Number is Not Acceptable)	· - · · · · · · · · · · · · · · · · · · ·		
	AMI FL FL 33174			JII BEL AUG	iloss (r box riumber is riot Acceptable)			
	· · · · · · · · · · · · · · · · · · ·		63					
			84	City	FL	85 Zip Code		
agent. I a	am familiar with, and accopt the oblig Signature, typed or printed name of registering age				ored when reinstating) DATE ADDITIONS/CHANGES TO DESIGNED AND	DIDECTORS IN 10		
TITLE	D OFFICERS AN	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND	Change Addition		
NAME	MUNOZ, MARCOS A, SR.	L_ been	1.1 TILE 1.2 NAME	ŀ	'	Change Audition		
STREET ADORESS	10234 SW 9TH TERRACE			ABBOTOO				
	MIAMI FL 33174		1.3 STREET					
CITY-ST-ZIP	S S	DELETE	1.4 CITY - S 2.1 TITLE	ST-ZIP		Change Addition		
NAME	MUNOZ, ELISA P		•		•	Criarige Applicat		
STREET ADDRESS	10234 SW 9TH TERRACE		2.2 NAME	I BOREON				
	MIAMI FL 33174		2.3 STREET					
CITY-ST-ZIP TITLE	MIAMI FL 33174	DELETE	2.4 CITY-	ST-ZIP		Change Addition		
NAME		_ otter	3.1 TITLE		ι	Change Addition		
STREET ADDRESS			3.2 NAME	ADODEGO				
*			3.3 STREET					
CITY-ST-ZIP TITLE		T DELETE	3.4. CITY-5	SI-ZIP		Change Addistra		
NAME			4.1 TITLE		ı	Change Addition		
			4. 2 NAME					
STREET ADDRESS			4.3 STREET	·				
CHTY-ST-ZIP TITLE		DELETE	4.4 CITY - S	IT-ZIP		Change Addition		
		[] Utitit	5.1 TITLE		·	Change Addition		
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET					
CITY-ST-ZIP		T BELFTE	5.4 CITY-S	T-ZIP		100		
TITLE		☐ DELETÉ	6.1 TITLE	Ì	L	Change Addition		
NAME			6.2 NAME					
STREET ADORESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP	1		64 CITY - S	T. 7IP				

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 the and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee on powered 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:

8 (306) 5924510