FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** PROFIT May 05 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 525953 (6)VEMI INTERNATIONAL CORPORATION Principal Place of Business Mailing Address 141 N.W. 25 AVE. 141 N.W. 25 AVE. MIAMI FL 33125 MIAMI FL 33125 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/16/1977 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1763441 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired M 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MICHELENA, PEDRO JR. A1 Name 141 N.W. 25 AVE. Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33125 83 84 City Zio 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 607.0505, Florida Statutes. Signature, typed or pricted name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 11 TITLE ☐ Change ☐ Addition MICHELENA, PEDRO OP. JR. NAME 1.2 NAME 141 N.W. 25 AVE. STREET ADDRESS 1.3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Addition MICHELENA, PEDRO, IVI NAME 2.2 NAME 141 N.W. 25 AVE. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TATLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change ___ Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE Change Addition NAME 52 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not quality for indicated on this annual report or supplemental annual report is true and accuration or director of the corporation or the receiver or trustee and accurate to Block 12 or Block 13 if changed, or on an attainment and accurate to the corporation. 305-6499904 SIGNATURE:

6.1 TITLE

62 NAME

6.3 STREET ADDRESS

Change

The exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information urale and that my signature shall have the same legal effect as if made under oath; that I am an exercise this report as required by Chapter 607, Florida Statutes; and that my name appears in

Addition

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP