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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # 587514**

INGO IN	TERNATIONAL INVESTMEN	FS, INC.					
Principal Plac	e of Business	Mailing Address	-		T INDIAN BIND BORN NOON BIND BIND BIND	PIETI AIBII ETEIL A	1814 81841 1881
1182 SUWANEE ROAD 1182 SUWANEE ROAD							
DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32114					DO NOT WRITE IN THI	C CDACE	
US		US			3. Date Incorporated or Qualifed	3 SPACE	
					09/26/1978		
2. Principal P	face of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21		26			59-1850273		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22		27			3. 661,000	Fee Re	·
City & Stat	e	City & State		, 	6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added t	o Fees
Zip 24	Country 25	Zip [39]	Country 30	У	 This corporation owes the current year In Personal Property Tax. 	ntangible ∐Yes	□No
	9. Name and Address of Curren		1	· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registered	J Agent	
			81	Name			
PERSCHMANN, LUTZ I.				Street Add	Iress (P.O. Box Number is Not Acceptable)		
1182 SUWANNEE ROAD			82	. Ollder Add	Addition to the theory		
DAY	TONA BEACH FL 32114		83	3			
			84	City		85 Zip (ode -
				1	F!	LII	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was au	thorized by	the corporati	poration submits this statement for the purpose of ion's board of directors. I hereby accept the app	ointment as re	registered gistered
	Signature, typed or printed name of registered ager			nt signature requir	ed when reinstating) DATE		
12.			13.		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	D DEDCOURAGE LUTZ (_		J		Change	[] Addition
NAME.	PERSCHMANN, LUTZ I.		1.2 NAME				
STREET ADDRESS	7100 007777100			T ADDRESS			
CITY-ST-ZIP			1.4 CITY-S	ST-ZIP		[] Change	Addition
TITLE	<u> </u>		2.1 TITLE			Cloude	Addition
NAME	, 2,,00,1,00,000,000,000		2.2 NAME				
STREET ADDRESS				TADORESS			
CITY-ST-ZIP			2.4 CITY-	ST-ZIP		Change	Addition
TITLE		⊢ nere ιε					
NAME	1		3.2 NAME	L			
STREET ADDRESS			4.0	ET ADDRESS			1
CITY-ST-ZIP		☐ DELETE	3.4. CITY- 4.1 TITLE	31-ZIF		☐ Change	Addition
TITLE	į		4.1 311CE	.		_ ,,	
NAME			1	ET ADDRESS			İ
STREET ADDRESS]						{
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-1			☐ Change	Addition
	}		5.1 THEE			_ •	
NAME STREET ADDRESS		•		ET ADDRESS			
			5.4 CITY-				
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition

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 607, 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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADORESS

May 03, 1999 8:00 am Secretary of State

05-03-1999 90083 008 ***150.00