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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

•	MENT # 664348 INTERNATIONAL FORWARDS	` '			
	ce of Business	Mailing Address			0181F 31011 51911 01814 1901
P.O. BOX 524103 MIAMI FL 33152		P.O. BOX 524103 MIAMI FL 33152			
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		02/08/1980 4. FEI Number	Applied For
21		26		59-1972544	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24]	25	29	30	8. This corporation owes or has paid the cul Personal Property Tax due June 30.	rrent year Intangible Yes No
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Current			10. Name and Address of New Registered	
G/	AYO, GILDA R.		81 Name		
1820 Ś W 127TH AVENUE MIAMI, FLORIDA			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
33	175		83		
			84 City	FL	85 Zip Code
11. Pursuant office or r agent. I a SIGNATURE	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligation of the state of the s		es, the above-named corpora authorized by the corpora oricla Statutes.		
12.	OFFICERS AND	and the same of th	13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	DP OUDA D	L DELETE	1.1 THUE		Change Addition
NAME	GAYO, GILDA R. 1820 S.W. 127TH AVE.		1.2 NAME		
STREET ADDRESS	MIAMI FL 33/75		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	1.4 CHY-ST-ZIP 2.1 DILE		Change Addition
NAME	ENRIGOE CAYO SECRETARY	-	22 NAME		_ v —
STREET ADDRESS	1820 SW 1270W		2 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FLA	33175	2 4 CGY-S1-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	•	
CITY-ST-ZIP		T BUILTE	3.4. CHY-S1-ZIP		Change Addition
TITLE		L] DELETE	4.1 TITLE 4. 2 NAME		Change Addition
STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADORESS		
CITY-ST-ZIP	eartify that the information supplies well-	this filing does not qualify to	6.4 CHY-\$1-ZIP	Section 119.07(3)(i), Florida Statutes. I further or	ertify that the information
indicaléd officer or	on this annual report or supplemental a	annual réport is true and ácc er or trustée empowerod to i	urate and that my signatu	rie shall have the same legal effect as if made united by Chapter 607, Florida Statutes; and that united by Chapter 607, Florida Statutes; and that	ider oath; that I am an