FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

1. Corporation Name

DOCUMENT #

F22741

(5)

lł	ITV	ERNA	TIONAL	PAT	TERN	SERVICE	E INC
,,	411	-1111	HOHAL	TA1	IEDN	DERAIL	* INC.

Principal Plac	the of Business HI TERRACE 33142	Mailing Address 1791 NW 21 TERRA MIAMI FL 33142	ICE				
2. Principal F	Place of Business				3. Date Incorporated or Qualified 03/11/1981	3a. Date of Las 02/13/	
21	TOCC OF ECOSINOSS	2a. Mailing Address			4. FEI Number	1 02/10/	Applied For
r	Suite, Apt. #, etc.				59-2089939		Not Applicable
22	27				5. Certificate of Status Desired		.75 Additional
23 City & Stat	City & State City & State				6. Election Campaign Financing		ee Required
ΞΥ1 Ζης	Country	28			Trust Fund Contribution		.00 May Be ided to Fees
24	[25]	Zip 29	Countr	у	8. This corporation has liability for in	ntangible tax unde	rs 199.032.
	9. Name and Address of Currer	it Registered Agent	30]		Florida Statutes 🛂 Yes	□ No	
		· ————————————————————————————————————	81	Name	10. Name and Address of New Re	gistered Agent	
	RINA, JOHN A			1.			
	W 21ST TERR		82	Street Add	fress (P.O. Box Number is Not Acceptable	a)	
MIAMI I	FL 33142		83				
			84				
11 Pursunal i	by the		I .			85	Zip Code
or register	ed agent, or both, in the State of Floric	and 607.1508, Florida Statulia, Such change was authori	tes, the above-	named corpo	ration submits this statement for the purp rd of directors. I hereby accept the appoi	OSe of changing it	e registered office
	th, and accept the obligations of, Secti	on 607.0505, Florida Statute	s.	oration's boa	ird of directors. I hereby accept the appoi	ntment as register	ed agent. I an
SIGNATURE _	Signature typical or printed name of registered agent a						
12.	OFFICERS AND		OTE Registered Ager	it signature require		DATE	
THE	D	DELETE	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIREC	FORS IN 12
NAME	LAUDICINA, LEONARA, R	[Ditti	1. 1 TITLE			☐ Change	
STREET ADDRESS	6620 S W 46 ST	•	1.2 NAME				
CITY-ST-ZIP	MIAMI, FL 00000 3315	5	1.3 STREET				
DEEL	DP	DELETE	1.4 CITY - S 2 1 TITLE	I - ZIP			
NAME	LAUDICINA, JOHN, A		2 2 NAME			Change	Addition
STREET ADDRESS	1791 N W 21 TERR		2.3 STREET	ADDRESS			
CL Y-ST ZIP	MIAMI, FL 00000 3315	5	2.4 CITY - S				
THEF		DELETE	3. 1 TITLE				-
NAME			3.2 NAME			☐ Change	Addition
STREET ADDRESS			33 SIREET	ADDRESS			İ
DILE			3.4 C/TY - ST	- ZIP	_		ĺ
4AME		☐ DELETE	4. 1 TITLE	7		☐ Change	Addition
TREEL ADDRESS			4.2 NAME				L Addition
STY-ST ZIP			4.3 STREET	ODRESS			
/!!! / 		Division	4.4 CITY - ST	ZIP			
IAM:		DELETE	5 1 TITLE			Change	Addition
CEELL ADORESS			5.2 NAME			·	
ITY - ST - ZIP			5 3 STREET A	-			
ille		DELETE	5.4 CHY- ST	ZIP			1
AMF			6. 1 THE			☐ Change	☐ Addition
THEET ASIONESS			6 2 NAME				
TY S1-Zir			63 STREET A	1			
4. Edo hereby of	certify that the information supplied wit	h this filing is voluntarily furnis	6.4 City-St-	ZIF Dualify for	the evention of the life		

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 appears in Block 12 or Block 12 if changed, or on an attachment with an address.

SIGNATURE:

SIGNAJURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

15 JANUARY1996

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