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Mar 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F23454** (4)
1. Corporation Name
VANGUARD INTERNATIONAL SALES, INC.



Principal Place of Business
**3690 N.W. 62ND STREET
MIAMI FL 33147**

Mailing Address
**3690 N.W. 62ND STREET
MIAMI FL 33147-7540**

3. Date Incorporated or Qualified 03/02/1981	3a. Date of Last Report 02/16/1996
4. FEI Number 59-2071312	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent

**SUAREZ, DIEGO R.
3690 NW 62ND STREET
MIAMI FL 33147**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

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

(NOTE: Registered Agent's signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	SUAREZ, DIEGO J, JR	1.2 NAME	
STREET ADDRESS	3750 NW 49TH ST	1.3 STREET ADDRESS	
CITY- ST- ZIP	MIAMI, FL 00000	1.4 CITY- ST- ZIP	☐ Change ☐ Addition
TITLE	V ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SUAREZ, HECTOR J.	2.2 NAME	
STREET ADDRESS	3690 NW. 62ND ST.	2.3 STREET ADDRESS	
CITY- ST- ZIP	MIAMI, FL 00000	2.4 CITY- ST- ZIP	☐ Change ☐ Addition
TITLE	VTD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	SUAREZ, DIEGO J, JR	3.2 NAME	
STREET ADDRESS	3750 NW 49TH ST	3.3 STREET ADDRESS	
CITY- ST- ZIP	MIAMI, FL 00000	3.4 CITY- ST- ZIP	☐ Change ☐ Addition
TITLE	AS ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	PAUL, ROBERT	4.2 NAME	
STREET ADDRESS	200 SE 1ST STREET	4.3 STREET ADDRESS	
CITY- ST- ZIP	MIAMI, FL 00000	4.4 CITY- ST- ZIP	☐ Change ☐ Addition
TITLE	PD ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	SUAREZ, DIEGO R	5.2 NAME	
STREET ADDRESS	3750 NW 49TH ST	5.3 STREET ADDRESS	
CITY- ST- ZIP	MIAMI, FL 00000	5.4 CITY- ST- ZIP	☐ Change ☐ Addition
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-18-97

305-633-0351

Date

Daytime Phone #

CR2E034 (9/96)