## 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 **DOCUMENT #** 

1. Corporation Name

ANKA	INTERNATIONAL	EDEIGHT	CODMADDING	CODD
MININA	INTERNATIONAL	LUCKION!	PURWARIJING	CH JRP.

Principal Place of Business

Mailing Address

1334-36 N.W. 78TH AVENUE RIDG D



MIAMI FL 33126			1334-36 N.W. 78TH AVENUE, BLDG, D MIAMI FL 33126									
							3. Date Incorporated of 02/10/1982	Qualified	3a. Date o	f Last R 1/22/19	eport <b>995</b>	
Principal Place of Business     2a.			Mailing Address		4. FEI Number		L		Applied For			
		26			59-2191337			ı	Not Applicable			
		Sui 27	Suite, Apt. #, etc.		5. Certificate of Status	Desired	K	\$8.75	Additional Required			
City & State		28 City	City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be						
Zip	Country Zip			Country		<del></del>				d to Fees		
24	25	29		30	,,,		This corporation has     Florida Statutes		Intangible tax i	under s	199.032,	
	9. Name and Address of Curren	t Registere	d Agent	<u> </u>			10. Name and Address			ent		
				8	1	Name						
	n, maria e			L.	2	Otro at A dele	Ideas (D.O. Boy Nigothan in Net Assessed					
500 SW 89TH COURT				ľ	2	Street Address (P.O. Box Number is Not Acceptable)						
MAMI	FL 33174			8	3							
				ي ا	_	A:-			······································			
				ľ		City			— <u>1</u> —1	1 .	Code	
O. 70g.000.0	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric h, and accept the obligations of, Secti	ika. Ouçili Çilki	nge was aumonze	s, the above d by the co	na rpor	med corpora ration's board	ation submits this statement d of directors. Thereby acce	for the pur pt the appo		ing its registered	egistered office agent. I am	
SIGNATURE _												
12.	Signature, typed or printed name of registered agent.  OFFICERS AND				prits	signat ire required			DATE			
TITLE	P OFFICERS AND	J DIRECTOR	S DELETE	13.			ADDITIONS/CHANGE	S 10 OFFI				
NAME	KATTAN, MARIA E.		☐ DELETE	1.1 THE					LJ	Change	Addition	
STREET ADDRESS	500 SW 89TH COURT			1.2 NAM								
CITY-ST-ZIP	MIAMI FL			1.3 STRE								
TITLE	ν		DELFTE	1.4 CITY 2.1 TITU		ZIP				Changa	F3 1400	
NAME	KATTAN, CARMEN E.			22 NAM						Change	Addition	
STREET ADDRESS	10370 S.W. 11TH STREET		238		2.3 STREET ADDRESS 2.4 CITY+S7 - ZIP						ŀ	
CITY-ST-ZIP	MIAMI FL											
TITLE	T		DELETE	3 1 TIFL		ZIF			——————	Change	Addition	
NAME	MENA, JOSE C.			3 2 NAM					L	Shariye	L] Xoulton	
STREET ADDRESS	PO BOX 356 N/A			3.3 STR		nnpree						
CITY-ST-ZIP	TEGUCIGALPA HONDURAS			3.4 CITY								
TITLE	\$		DELETE	4. 1 TITLE		<del>*"</del>		···		Change	Addition	
NAME	LARACH, CLAUDETTE S			4.2 NAM					الما			
STREET ADDRESS	1111 S.W. 104TH AVE.			4.3 STRE	FLAD	DOBESS						
CITY-ST-ZIP	MIAMI FL			4.4 CHY								
TITLE			DELETE	5 1 TiTul					П	Change	Addition	
NAME				5.2 NAME						5~		
STREET ADDRESS				5 3 STRE	ET AD	ODRESS						
CITY-ST-ZIP				5.4 C·TY								
TITLE			☐ DELE1E	6. 1 TITLE						Change	Addition	
NAME				6.2 NAME						9-		
STREET ADDRESS				6 3 STREE	EL AD	ODRESS						
CITY-ST-ZIP				1	CiTY-SI-ZIP							
14 I do hereby	certify that the information supplied w	ith this filing	ic unturitorily furnic	bad and da		oot suglifudo	41.					

I do nereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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: CARMEN E. KATTAN 5-29-96 (345) 594-0129
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Date

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