Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90203 002 ***150.00

PROFIT. CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F94000002918

ECOSINTEZ (U.S.A.) CORPORATION

Principal Place	of Business	Mailing Address				I (\$655\$ (118 (851) \$181) ABIIS ABIIS ABIIS ABIIS	Tird (ibia laia)	. (1991 1917 1961
975 ARTHUR GODFREY RD. 975 ARTHUR GODFREY RD.								•
STE. 211 STE. 211			004.40			DO NOT WRITE IN THIS	SPACE	•
MIAMI BEACH FL 33140 MIAMI BEACH FL 33140						3. Date Incorporated or Qualifed		
ر از این این این این این این است. در این						06/03/1994	٠	•
Principal Place of Business Za. Mailing Address						4. FEI Number	_ ·	oplied For
21 26						52-1816609		ot Applicable
Suite, Apt. #, etc.				5. Certifcate of Status Desired		5. Certifcate of Status Desired	\$8.75 / Fee Re	
22 27 City & State City & State						C. Flatin Compaign Figureing		May Be
¬ • • • • • • • • • • • • • • • • • • •						6. Election Campaign Financing Trust Fund Contribution	Added 1	
Zip				Country		8. This corporation owes the current year Inta		
24	25 29 30					Personal Property Tax.	☐Yes	□No
24	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent	
\$ 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.					Name			
DOROFEEN, BORRIS				82	Street Add	ress (P.O. Box Number is Not Acceptable)		
975 ARTHUR GODFREY RD.						ioso (i .o. zox italiao i o italiao i		
STE. 211				83				
MIAMI BEACH FL 33140				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	Signature, typed or printed name of registered agent	t and title if englishing	(NOTE: Regis	nenA bereta	t signature require	od when reinstating) DATE		
12.	OFFICERS ANI		(NOTE: Regis	13.	i signature require	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	ORS IN 12
TITLE	•Р		ELETE	1.1 TITLE			Change	Addition
NAME	DOROFEEV, BORIS			1.2 NAME			•	-
STREET ADORESS	975 ARTHUR GODFREY RD., #211			1.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33140			1,4 CITY-\$1	r-ZIP			4.
TITLE	D	□ D	ELETE	2.1 TITLE			☐ Change	☐ Addition
NAME	PROSVETOVA, ALLA			2.2 NAME				
STREET ADDRESS	975 ARTHUR GODFREY RD., #211			2.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI BEACH FL 33140			2. 4 CITY-S	T-ZIP	****		
TITLE	7	□ D	ELETE	3.1 TITLE			☐ Change	Addition
NAME				3.2 NAME			•	1
STREET ADDRESS	-			3.3 STREET	ADDRESS		•	ł
CITY-ST-ZIP				3.4. CITY-S	T-ZIP		☐ Change	☐ Addition
TITLE				4.1 TITLE				
NAME		•		4.2 NAME		·		· .
STREET ADDRESS				4.3 STREET	1			
CITY-ST-ZIP				4.4 CITY-ST	r-zip		Change	Addition
TITLE				5.1 TITLE 5.2 NAME			. J.	
NAME	Mary St. Strapper of		1	5.3 STREET	ADDRESS			
STREET ADDRESS	11 21/20 2 2			J.J G / 11LL /				

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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

04-16-99 305-586-6109

Change

Addition