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

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

## **FILED** May 01 1997 8:00am Secretary of State

**ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # G21223 (4) L.H.M. INTERNATIONAL INC. Principal Place of Business Mailing Address 7318 N.W.79th TERRACE 7318 N.W.79th TERRACE MIAMI, FLA.33166 MIAMI, FLA:33166 3. Date Incorporated or Qualified 3a. Date of Last Report 01/31/1983 04/21/1995 2. Principal Place of Business 2a. Mailing Address Applied For 59-2265530 21 26 Not Applicable Suite, Apt. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip 7ıp Country Country This corporation has liability for intangible tax under s. 199,032. X Yes No Florida Statutes 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ARGUELLO, LUIS Street Address (P.O. Box Number is Not Acceptable) 9617 S.W. 36 TH STREET MIAMI, FL.33165 83 Zip Code 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, typed or printed name of registered agent and till all applicable. (NOT: Registered Agent signature required when reinstalling) DATE OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITI F 1.1 TITLE NAME ARGUELLO, LUIS 1.2 NAME STREET ADDRESS 9617 S.W. 36 STREET MIAMI>FLA. 1.3 STREET ADDRESS CITY-ST-ZIP 14 CiTY-\$1-ZIP DELETE TITLE 2111111 Change NAME COPELENKO >AMPARO STREET ADDRESS 2.3 STREET ADDRESS 10830 S.W. 84TH ST.#F 2 CITY-ST-ZIP 2 4 CHY- ST- ZIP DELETE TITLE 8 1 TITLE Change

Addition Addition STREET ADDRESS 3.3 STHEET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - 7/P TITLE DELETE 411011 Change Add tion 4 2 NAME STREET ADDRESS 4 3 STREET ADDRESS 4.4 C(1Y+S1+7)P CITY-ST-ZIP DELFTE 511011 Change 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 OHY: ST-7IP 50000216530<del>5</del> -05/05/97--01022--063 DELETE Addition TITLE 6:1001 NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CHY-S1-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)(t). Florida Statutes. I further certify that the information indicated on this angual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath, that I am an officer or director of the directorion of 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 changed, or my an attachment with an address.

SIGNATURI

LUIS ARGUELLO, 4-8-1997 305-887-9550