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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **G26949** **(9)**

1. Corporation Name

FINANCE INTERNATIONAL, CO.

Principal Place of Business	Mailing Address
6135 NW 167TH ST. E-22 MIAMI FL 33015 US	6135 NW 167TH STREET E-22 MIAMI FL 33015 US

3. Date Incorporated or Qualified: **03/08/1983**
3a. Date of Last Report: **04/26/1995**

2. Principal Place of Business
21 One Progress Plaza
22 Suite 2200
23 St. Petersburg, FL
24 33701 25 USA.

2a. Mailing Address
26 P.O. Box 531
27
28 St. Petersburg, Florida
29 33731 30 USA.

4. FEI Number: **59-2381195** ☐ 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

9. **Name and Address of Current Registered Agent**

FERNANDEZ, ANTONIO
2000 BRIGHTWATERS BLVD., NE
ST. PETERSBURG FL 33702

10. **Name and Address of New Registered Agent**

81 Name: SANE
82 Street Address (P.O. Box Number is Not Acceptable):
83
84 City: FL 85 Zip Code: 33704

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 of corporate officer or director) (New Registered Agent signature required when changing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDV	☐ DELETE	1.1 TITLE: PDV ☒ Change ☐ Addition
NAME	FERNANDEZ, ANTONIO		1.2 NAME: Fernandez, Antonio
STREET ADDRESS	200 BRIGHTWATERS BLVD, NE		1.3 STREET ADDRESS: 2000 Beightwaters Blvd., N.E.
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY-ST-ZIP: St. Petersburg, Florida 33704.
TITLE		☐ DELETE	2.1 TITLE: ☐ Change ☐ Addition
NAME			2.2 NAME:
STREET ADDRESS			2.3 STREET ADDRESS:
CITY-ST-ZIP			2.4 CITY-ST-ZIP:
TITLE		☐ DELETE	3.1 TITLE: ☐ Change ☐ Addition
NAME			3.2 NAME:
STREET ADDRESS			3.3 STREET ADDRESS:
CITY-ST-ZIP			3.4 CITY-ST-ZIP:
TITLE		☐ DELETE	4.1 TITLE: ☐ Change ☐ Addition
NAME			4.2 NAME:
STREET ADDRESS			4.3 STREET ADDRESS:
CITY-ST-ZIP			4.4 CITY-ST-ZIP:
TITLE		☐ DELETE	5.1 TITLE: ☐ Change ☐ Addition
NAME			5.2 NAME:
STREET ADDRESS			5.3 STREET ADDRESS:
CITY-ST-ZIP			5.4 CITY-ST-ZIP:
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:

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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] ANTONIO FERNANDEZ 2/9/96 (813) 8980015

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #