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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # G9998

1. Corporation Name

OPA INTERNATIONAL CORPORATION

Principal Place of Business 7122 N.W. 50TH STREET

Mailing Address

7122 N.W. 50TH STREET

FILED Feb 17, 1999 8:00am **Secretary of State**

02-17-1999 90042 045 ***150.00



IIAMI FL 33166	-5636	MIAMI FL 33100-3030				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						04/30/1984			
Deineinel Blo	ace of Business	2a. Mailing Address				4. FEI Number	App	lied For	
. Рппсіраі Ріє 7	ace of Business	<u> </u>				59-2411367			
Outton Ame d	1 010	_1==1					\$8.75 A	dditional	
Suite, Apt. #	r, etc.	<u>⊢</u>				5. Certificate of Status Desired	Fee Rec	uired	
City & State						6. Election Campaign Financing	\$5.00	May Be	
City & State	!	├ ┐ '				Trust Fund Contribution	Added to	Fees	
31-	Country		Cou	intry		8. This corporation owes the current year Intar	ngible		
Zip ⊐	·		an l	•		Personal Property Tax.	Yes	□No	
<u> </u>	25			Τ		10. Name and Address of New Registered A	gent		
	9. Name and Address of Current	registered Agent		81 N	ame			• •	
LEWI	S, WILLIAM C., JR., P.A.	3. Date Incorporated or Qualified On/(30)/1984 2a. Mailing Address 4. FEI Number Applied For 59-2411367 Not Applicable 59-2411367 Stutte Stutt							
	BRICKELL KEY DRIVE	•		82 S	treet Addre	ess (P.O. Box Number is Not Acceptable)		63	
	E 206			93	_		# - 11 2 11 3	Ish 4 34 (34)	
							[[4] <u>[[[]</u>	Mar 8-36 (85)	
MIAN	AI FL 33131			84 C	ity		85 Zip C	ode "	
						TL	hanging its	registered	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	s, the a	above-na	amed corpo	oration submits this statement for the purpose of controls board of directors. I hereby accept the appoint	tment as rec	jistered	
office or re agent. I ar	egistered agent, or both, in the State of m familiar with, and accept the obligat	tions of, Section 607.0505, Flori	da Stat	tutes.	corporatio	•		-	
SIGNATURE		ALOTE: I		d Acent sign	nature required	d when reinstating) DATE			
		t dive the neppens			Hatare regards	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
12.			_						
TITLE	PD	C pereic				• • • • •			
NAME	OSPINA, ALBERTO					•			
STREET ADDRESS	AVENIDA CARACAS #35-53				1			- 1	
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NAME .	BOGGIO, PIER CARLO				ļ		4	-	
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NAME	ALVARADO, BENJAMIN		3.21	NAME					
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NAME :	AUTHOR CADACAC MOS ECA	•			NDESS				
STREET ADDRESS									
CITY-ST-ZIP	BOGOTA - COLUMBIA	□ DELETE	_		IP		Change	Addition	
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NAME						•			
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CITY-ST-ZIP					IP .		Chance	☐ Addition	
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NAME			6.2	NAME					
STREET ADDRESS	100-		6.3	STREET AD	DDRES\$	•			
				CITY-ST-Z					
CITY-ST-ZIP	1	in this files does not qualify for			atatad in	Section 119.07(3)(i), Florida Statutes, I further cer	tify that the	information	

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 turner certify that the information and 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.

Benjamin alogrado Tollo