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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED	
Mar 26 1998 8:00am	ì
Secretary of State	

, , , , , ,	1998	DIVISION OF	CORPORATION	ONS	Secretary of State
1. Corporation	MENT # J8727 NAR INTERNATIONAL, INC.	7 3 (5)			
,	e of Business	Mailing Address			1 (Batistik dink taris 1801A 1181) soona 1111 pidis diabi arabi arabi arabi arabi arabi arabi 1801 1891
3845 SW 4 PEMBROKE	18t 8t. : Park fl 33023	3845 SW 41ST 6T. PEMBROKE PARK FL (33023		
US		US			DO NOT WRITE IN THIS SPACE
					3. Date incorporated or Qualified 08/14/1987
2, Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied For
Suite, Apt.	# #10	Suite, Apt. #, etc.			59-2836012 Not Applicable
22 Soile, Apr.	# ₁ etc.	27			5. Certificate of Status Desired Fee Required
City & Stat	6	City & State		•	6. Election Campaign Financing \$5.00 May Be
Zip	Country	28 Zip	Country		Trust Fund Contribution Added to Fees
24	25	29	30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre			··	10. Name and Address of New Registered Agent
	CHARLES A. ROSS PA		81	Name	θ
	845 SW 41 ST.		82	Street	et Address (P.O. Box Number is Not Acceptable)
r	EMBROKE PARK FL 33023		83		
			84	City	85 Zip Code
				,	╊·┗ │ ┤ `
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State)2 and 607.1508, Florida Sta tut ∋ of Florida, Such change was	tes, the above authorized by	∍-named ≀the cor	od corporation submits this statement for the purpose of changing its registered or
"	im familiar with, and accept the oblig	ations of, Section 607,0505, Fl	orida Statutes	3.	
SIGNATURE	Signature, typed or printed name of regulered ag-	ent and title if applicable (NOT	IE Registered Age	nt signature	ure required when reinstating) DATE
12.		ID DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE Name	VSM RIBADENEIRA, FELIPE	C Decent	1.1 TITLE 1.2 NAME		Li cuarge Lii Addinon
STREET ADDRESS	3845 SW 41ST ST.		1.3 STREET	ADDRESS	; [†]
CITY-ST-ZIP	PEMBROKE PARK FL		1.4 CITY-S	T- ZIP	
TITLE	و D	☐ DELETE	2.1 TITLE		☆ Change ☐ Addition C
NAME	JOAQNIN RIBADENEIRA		2.2 NAME		TOARUIN
STREET ADDRESS	3845 SW 01872 87 PEMBROKE PARK FL		2.3 STREET		6 41 st.
CITY-ST-ZIP TITLE	(CHIDITORIC I MIN I'L	DELETÉ	2. 4 CITY - 5 3.1 TITLE	SI-ZIP	Change Addition
NAME	L.		3 2 NAME		
STREET ADDRESS			3.3 STREET	address	
CITY-ST-ZIP			3.4. CITY - S	T-ZIP	
TITLE		DELETE	4.1 TITLE		Change Addition
NAME Street Address			4. 2 NAME 4.3 STREET	ADDDECC	,
CITY-ST-ZIP			4.4 CITY - S		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET	ADDRESS	
CITY - ST - ZIP		T briefe	5.4 CITY - ST	r-ZIP	T Change T addition
TITLE NAME		[_] DELETE	6.1 TITLE 6.2 NAME		Change Addition
STREET ADDRESS			6.3 STREET	ADDRESS I	}
CITY-ST-ZIP			6.4 CITY-SI		
	pertify that the information supplied w	rith this filing does not qualify for			ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information in abuse shall have the same legal effect as if made under nath; that I am an

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 it changed, or on an attachment with an address.

SIGNATURE