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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K69011

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ARGENTECH INTERNATIONAL CORP.

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FILED Feb 12 1998 8:00am Secretary of State

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Principal Place of Business			Mailing Address					T THE FEBRUARY BIND BOINE WHITH BRIDE TINDS IN	94 BERNT BIRNT	1 81841 81811 BJQ	/// B/B/// /BB/	
12916 S.W. 133 CT. MIAMI FL 33186			12916 S.W. 133 CT. MIAMI FL 33186					DO NOT WRIT	E IN THIS	SPACE		
							ı	Date Incorporated or Qualified 02/28/1989				
2. Principal Place of Business			2a. Mailing Address					FEI Number		A	pplied For	
1		26	· · · · · · · · · · · · · · · · · · ·			65-0106		65-0106079		N	ot Applicable	
Suite, Apt. #, etc.		27					5. Certificate of Status [Additional equired	
City & State		28]	City & State					Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip	Country 25	29	Zip	Country 30				This corporation owes or has p Personal Property Tax due June	930. [Yes [ntangible No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered A						į
OSPINA, LUZ M.					81							
10087 S.W. 144TH AVENUE MIAMI FL 33186						Street Ad	idress (P.	O. Box Number is Not Accepta	ble)			
						L						
					84	City			FL	• `	Code	
office or re agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Stam familiar with, and accept the poble.	ate of Flori	ida. Such change was i	authorized	d bv	the corpor	propretion ration's b	n submits this statement for the poard of directors. I hereby acce	purpose o pt the app	f changing i pointment as	its registered registered	
	Signature, typod or plinters same of regelered	f "			d Ager	oni signature rec	·		DATE	- FIRE ATO		
12.	OFFICERS	MD DIRE	the same and the s	13.			A	ADDITIONS/CHANGES TO OFFI	CERS AND			
TITLE	ST		DELETE	1.1 Tf						Change	Addition	
NAME	OSPINA, LUZ			1.2 NAA								
STREET ADDRESS	10087 SW 144 AVE	ŀ			1.3 STREET ADDRESS					İ		
CITY-ST-ZIP	MIAMI FL		DELFTE	1.4 CI		T-ZIP				Change	Addition	
TITLE	, .		[] MILLE	2 1 TI							L.J ADDIOVA	
NAME	CHUECO, LUIS			2.2 N						;		l
STREET ADDRESS	12916 SW 133 CT			23 ST	MFFT	ADDRESS					1 /	

NAME

STREET ADDRESS

CITY-ST-ZIP

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 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 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 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 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 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 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 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 in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes, I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes, I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes, I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes, I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes, I furt

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3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY - ST- ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

DELETE

DELETE

DELFTE

DELETE

SIGNATURE:

MIAMI FL

MIAMI FL

GARCIA, MANUEL

12916 SW 133 CT

CITY-ST-ZIP

STREET ADDRESS

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CITY-ST-ZIP

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TITLE

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