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**FILED**

**Apr 04 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION  
ANNUAL REPORT  
1997**



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

**DOCUMENT # K93745 (3)**  
1. Corporation Name  
**REYES ASSOCIATES INTERNATIONAL MARKETING, INC.**



Principal Place of Business  
**140 LAWN WAY  
MIAMI SPRINGS FL 33166  
US**

Mailing Address  
**140 LAWN WAY  
MIAMI SPRINGS FL 33166-5141  
US**

3. Date Incorporated or Qualified  
**06/08/1989**

3a. Date of Last Report  
**05/01/1996**

4. FEI Number  
**65-0131961**

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

2. Principal Place of Business

21 State, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

9. Name and Address of Current Registered Agent

**REYES, PILAR  
1800 N.W. 24TH AVENUE  
#705  
MIAMI FL FL 33135**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE  DELETE

NAME **PD REYES, PILAR**

STREET ADDRESS **1800 N W 24TH AVE #705**

CITY- ST- ZIP **MIAMI FL**

TITLE  DELETE

NAME **VD REYES, GERMAN**

STREET ADDRESS **1800 N.W. 24TH AVE #705**

CITY- ST- ZIP **MIAMI FL**

TITLE  DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE  DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

TITLE  DELETE

NAME

STREET ADDRESS

CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  Change  Addition

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

21 TITLE  Change  Addition

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

31 TITLE  Change  Addition

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

41 TITLE  Change  Addition

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

51 TITLE  Change  Addition

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

61 TITLE  Change  Addition

62 NAME

63 STREET ADDRESS

64 CITY- ST- 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)(i), Florida Statutes. I further certify that the information included 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 of this report, or on an attachment with an address.

SIGNATURE: *German Reyes* **GERMAN REYES** 03-31-97 (30) 887-4892

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

CR2E034 (9/96)