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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

(1)

DOCUMENT #
1. Corporation Name BUSINESS CONCEPT INTERNATIONAL INC.



Principal Place of	of Business	Mailing Address							
P.O. BOX 65 Miami Fl 33		P.O. BOX 653141 MIAMI FL 33265- 0 14	ıı						
						3. Date incorporated or Qualified 09/18/1989	3a. Date	of Last Re)6/28/1 9	
2. Principal Place	Se of Business 36712 F.	2a. Mailing Address 26			65-0202320 Not Applic			Applied For Not Applicable	
Suite, Apt. #,		Suite, Apt. #, etc.	******			5. Certificate of Status Desired Security \$8.75 Additional Fee Required			
City & State 23 MINM	1.7-1	City & State			Election Campaign Financing Trust Fund Contribution	Trust Fund Contribution Added to Fees			
24 3316	Country	Zip 29	Coun	ntry		110110111111111111111111111111111111111	□ No		199.032,
	9. Name and Address of Curren	l Registered Agent				10. Name and Address of New F	legistered /	gent	
			-	81	Name				
CALLE, ARMANDO 14452 S.W. 138TH PLACE				82	Street Addre	ss (P.O. Box Number is Not Acceptat	ole)		
	FL 33186			83					
			-	84	City		FL	85 Zq	p Code
 Pursuant to or registere familiar with 	othe provisions of Sections 607.0502 diagent, or both, in the State of Floric n, and accept the obligations of, Secti	and 607.1508, Florida Statu la. Such change was auth <mark>ori</mark> on 607.0505, Florida Statu te	ites, the abovized by the or is.	ve na orpo	amed corpora oration's board	ation submits this statement for the pu d of directors. I hereby accept the app	ointment as	registered	agent. I am
SIGNATURE	lignature, typed or printed name of registered agent	and the itapplicable. IN	ЮТЕ: Registered /	Agant	signature required		DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF			
TITLE	DP	☐ DELETE	1 1 111	TLE.	[L] Change	☐ Addition
NAME	CALLE, ARMANDO		1.2 NA						
	14452 S.W. 138TH PLACE		1351	REFT A	ADDRESS				
STREET ADDRESS									
CITY-ST-ZIP	MIAMI FL	pro pro pre	14 CH	IY-ST	r - ZIP			1 Change	C Addition
	MIAMI FL DTS	☐ DELFTE	14 CH 2 1 TH	IY-ST TLE	T- ZIP] Change	Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS	MIAMI FL DTS CALLE, ARMANDO 14452 S.W. 138TH PLACE	□ DELETE	14 Cri 2 1 Til 2 2 NA 2 3 STF 2 4 Cri 3 1 Til 3 2 NA 3 3 ST 4 4 Cri 4 2 NA 4 3 STF 4 4 Cri 5 1 Til 5 2 NA 5 3 STF 5 4 Cri	IY-ST TLE AME REFT / IY-ST TLE AME TREET / TLE TLE TLE TLE TLE TLE TLE TLE TLE TLE	ADDRESS 1-ZIP ADDRESS 1-ZIF AUDRESS 1-ZIP ADDRESS		[Change	Add tion
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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 report or supplemental annual report is true and accurate and that my signature shall have the same report or supplemental annual report is true and accurate and that my signature shall have the same report or supplemental annual report is true and accurate and that my signature shall have the same report or supplemental annual report is true and accurate and that my signature shall have the same report or supplemental annual report is true and accurate and that my signature shall have the same report or supplemental annual report is true and accurate and that my signature shall have the same report or supplemental annual report is true and accurate and that my signature shall have the same report or supplemental annual report is true and accurate and that my signature shall have the same report or supplemental annual report is true and that my signature shall have the same report or supplemental annual report is true and true true and that my signature shall have the same 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.

04/39/96 (305) 594-5667