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

PROFIT CORPORATION ANNUAL REPORT

1998

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THE PERSON



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

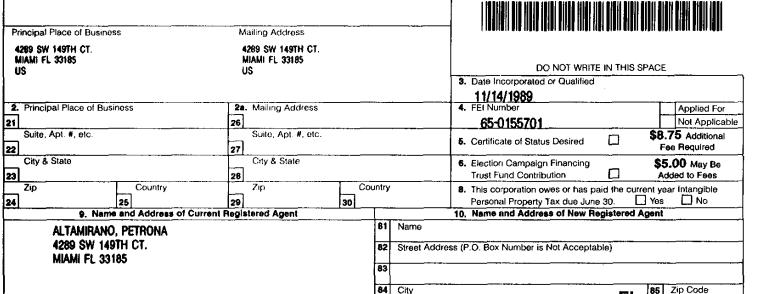
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L295

(5)

PPARR INTERNATIONAL, INC.

FILED Apr 09 1998 8:00am Secretary of State



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 Statu 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	Signature, typed or printed name of requirered agent and title if applicat	ole (NOTE F	tegistered Agent signature req	quired when reinstaling) DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12
TITLE	DP	DELETE	1.1 TITLE		Change	Addition
NAME	ALTAMIRANO, PORFIRIO		1.2 NAME			
STREET ADDRESS	4289 SW 149 CT		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY - ST-ZIP			
TITLE	D	DELETE	2.1 TITLE		Change	Addition
NAME	ALTAMIRANO, PETRONA		2.2 NAME			
STREET ADDRESS	4289 SW 149 CT		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE	···	DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change	Addition Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
a			- 4 61704 57 745			

14. I hereby certify that the information supplied with this filling 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 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 altachment with an address

SIGNATURE: DETAMA Attamino PETRONA ATAMIRAND 3-31-98 (305) 220:

3R2E034 (10/97)