

5-11-983-7012-C  
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 11 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L50289 (2)  
1. Corporation Name  
CHAMEX INTERNATIONAL, INC.

Principal Place of Business 2131 HOLLYWOOD BLVD SUITE 303 HOLLYWOOD FL 33020	Mailing Address 2131 HOLLYWOOD BLVD SUITE 303 HOLLYWOOD FL 33020
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1905 N. ATLANTIC BLVD Suite, Apt. #, etc. 22 12-A City & State 23 FT. LAUDERDALE, FL. Zip 24 33305		2a. Mailing Address 25 1905 N. ATLANTIC BLVD Suite, Apt. #, etc. 26 12-A City & State 27 FT. LAUDERDALE, FL. Zip 28 33305		3. Date Incorporated or Qualified 02/09/1990	
		4. FEI Number 65-0190546		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent ROBINSON, JOSEPH T 68 W FLAGLER ST STE 500 MIAMI FL 33130		10. Name and Address of New Registered Agent	
		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P
NAME	PIHA, SALOMONE VITTORIO	1.2 NAME	PIHA SALOMONE VITTORIO
STREET ADDRESS	2131 HOLLYWOOD BLVD #303	1.3 STREET ADDRESS	1905 N. ATLANTIC BLVD #12-A
CITY-ST-ZIP	HOLLYWOOD FL	1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL. 33305
TITLE	D	2.1 TITLE	
NAME	PIHA, JUDY ANNE	2.2 NAME	PIHA, JUDY ANNE
STREET ADDRESS	2131 HOLLYWOOD BLVD #303	2.3 STREET ADDRESS	1905 N. ATLANTIC BLVD #12-A
CITY-ST-ZIP	HOLLYWOOD FL	2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL. 33305
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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 attachment with an address.

SIGNATURE:

4/30/98 (954) 563.9554

CR2E034 (10/97)