COF ANNU	PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			.*
DOCUI	MENT #	L9092	3 (8)			
1 1	INDO INTERNA	TIONAL INVES	STMENT, INC.			
المحتمون ا		Š				
Principal Place		1	Mailing Address			
2800 RIPTON CT ORLANDO FL 32835			2800 RIPTON CT ORLANDO FL 32835			
US			U\$		3. Date Incorporated or Qualified	
	ace of Business		2a. Mailing Address		07/25/1990 4. FEI Number	05/01/1995 Applied For
Suite, Apt.	40 CLIP #, etc.	per a	26 //090 C Suite, Apl. #, etc.	cipper ci	59-3023495	Not Applicable  \$8.75 Additional
22 City & State			27 City & State	*** ****	5. Certificate of Status Desired	Fee Required
23 WIN	mermen		City & State  28 WINDEN W	neu	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 347	86 25 Co.	untry US	29 34786	Country US	8. This corporation has liability fo Florida Statutes	r intangible tax under si 199.032, es  No
	9. Name and Ad	dress of Current	Registered Agent	81 Name	10. Name and Address of New	Registered Agent
7/TON DOCED W					ess (P.Q. Box Number is Not Accepta	able).
9208 BAY HILL BLVD. ORLANDO FL 32819				83	40 CLIPPE	r <1
O NEAN	100 1 E 02013			84 Cit.		
11. Pursuant t	to the provisions of S	ections 607.0502 a	nd 607.1508, Florida Statutes,	the above-named corpor	NOC MEC- ration submits this statement for the pi	FL 3478(0) urpose of changing its registered office
i or register	ed agent, or both, in	the State of Florida	Such change was authorized n 607.0505, Florida Statutes.	by the corporation's boar	rd of directors. I horeby accept the ap,	pointment as registered agent. I am
	Signature, typed or printed n			Registered Agent signature require	o when reinstating)	DATE
12. TITLE	<u> </u>	OFFICERS AND	DIFIECTORS  DELETE	13, 1.1 THLE	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12 Change Addition
NAME	ZITON, ROGE		<u></u>	1.2 NAME		C. Outside C. Manifoli
STREET ADDRESS	9208 Bayhili Orlando fl			1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	ST		DELETE	1.4 CITY-ST-ZIP 2 1 TITLE		Change Addition
NAME	ZITON, JACQ			2.2 NAME		
STREET ADDRESS	2800 RIPTON ORLANDO FL			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	Olipatoo i c	. 02000	DELETE	24 CITY-ST-ZIP 3 1 TIJLE		Change Addition
NAME			<del></del>	3.2 NAME		
STREET ADDRESS				3.3. STREET ADDRESS		
CITY-ST-ZP TITLE			DELETE	3.4 C-TY-ST-ZIP		Change Addition
NAME			C) secon	4.2 NAME		Shange Addition
STREET ADDRESS				4.3 STREET ADDRESS		
CITY-ST-ZiP			FIG. C.Y.	4.4 CITY - ST - ZIP		
TITLE NAME			DELETE	5 1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS				5.3 STREET ADDRESS		
CITY-ST-ZIP				5.4 CITY - ST - ZIP		
TITLE			☐ DELETE	6. 1 TITLE		Change Addition
NAME STREET ADDRESS				6.2 NAME		
CITY-ST-ZIP		/	1	6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		
14. I do hereb	y certify that the infor the information indic	mation supplied vi	this filing is voluntarily furnish	ed and does not qualify for	or the exemption stated in Section 119	9.07(3)(k), Florida Statutes. I further
oath; that I	l am an officer or dire Block 12 or Nock 1	ctor of the corpus	report of supplemental annual	report is true and accura Inipowered to execute this	te and that my signature shall have the s report as required by Chapter 607, F	e same legal effect as if made under - L
SIGNAT		URE AND TYPED OR P	NITED NAME OF SIGNING OFFICER O	OR DIRECTOR	Date	Daytime Phone #
			Ţ			· · ·