2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

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Apr 08, 2005 08:00 AM Secretary of State **DOCUMENT # M15903** FAMÉ INTERNATIONAL, INC. Mailing Address Principal Place of Business 12100 S.W. 112TH AVE. 12100 S.W. 112TH AVE. MIAMI, FL 33176 MIAMI, FL 33176 04062005 No Cha-P CR2E034 (10/03) Applied For 4. FEI Number 59-2711045 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANTONI, GREGORY DO NOT WRITE 12100 SW 112TH AVE MIAMI, FL 33176 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE ANTONI, GREGORY NAME 12100 SW 112TH AVE 04/08/05-80048-024 STREET ADDRESS CITY -ST-ZIP MIAMI, FL 33176 TITLE ANTONI, GREGORY R. NAME 12100 SW 112TH AVE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33176 TITLE NAME ANTONI, GREGORY 12100 SW 112TH AVE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33176 IN THIS SPACE TITLE NAME STREET ADDRESS CiTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. 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 report or supplemental report is that an an officer or director of the corporation or the receiver or trustee emotivaried to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #