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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

**FILED** Apr 20 1998 8:00am Secretary of State

HEFRI	SA INTEHNATIONAL, INC.				
Principal Plac	ce of Business	Mailing Address			
4941 SW 14	HST AVE	4941 SW 141ST AVE			
MIAMI FL 33175 MIAMI FL 33175					
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
2 Principal F	Place of Business	2a. Mailing Address			08/25/1986
					4. FEI Number Applied For
21   26     Suite, Apt. #, etc.   Suite, Apt. #, etc.			*		59-2715175   Not Applicat
27					5. Certificate of Status Desired \$8.75 Additional Fee Regulred
City & State City & State					
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countr	у	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Registered Agent
CI	EVALLOS, HERNANDO	-	81	Name	
	941 SW 141ST AVE		82	Street Ada	dress (P.O. Box Number is Not Acceptable)
1	IAMI FL 33175		"	511001700	erede (ie. son Horrico) la Not receptable)
1			83		
			84	City	lee 7 out
<u></u>			"		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Sta	itules, the abov	e-named cor	rporation submits this statement for the purpose of changing its registere ation's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and accept the obli	igations of Section 607.0505,	Florida Statute	y the corpora is.	ation's board or directors. I nereby accept the appointment as registered
SIGNATURE					
	Signatura, typed or printed name of registered a			ent signature raqu	uired when reinstating) DATE
12.	· · · · · · · · · · · · · · · · · · ·	ND DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THILE	PST DELETE		1.1 TITLE		L Change L Addition
NAME	CEVALLOS, HERNANDO, S	K.	1.2 NAME		
STREET ADORESS	4941 SW 141ST AVE			T ADDRESS	
CITY-ST-ZIP	MIAMI FL	T ocurre	1.4 CITY	ST - ZIP	
TITLE	D OFFICE OF THE PROPERTY OF A	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CEVALLOS, HERNANDO, S	К.	2.2 NAME		
STREET ADDRESS 4941 SW 141ST AVE			2.3 STREE	T ADDRESS	
CITY-ST-ZIP	MIAMI FL	Deter	2.4 CITY-	ST-ZIP	
TITLE	VD	DELETE DELETE	3.1 TITLE		Change Addition
NAME OXDERY ADDRESS	CEVALLOS-SALVADOR, RO	UHI	3 2 NAME	1	
STREET ADDRESS	HURTADO-513			T ADDRESS	
CITY-ST-ZIP TITLE	GUAYAQUIL, ECUADOR PD	DELETE	3.4. CITY	ST-ZIP	
	1 -	L. DECEIE	4.1 TITLE		Change L Addition
NAME CZOCET ADDRESS	JERVIS, LUIS		4. 2 NAME	1	
STREET ADDRESS	HURTADO-513			ADDRESS	
CITY-ST-ZIP TITLE	GUAYAQUIL, ECUADOR	DELETE	4.4 CITY-1	ST-ZIP	0
NAME		☐ nereit	5.1 TITLE		☐ Change ☐ Addition
			5.2 NAME		
STREET ADDRESS				ADDRESS	
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY- S	ST-ZIP	
NAME		L Dettic	6.1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME	4000000	
CITY-ST-7IP			6.3 STREET	ADDRESS	
MIT - MI - AP			= CAPITY. C	710   1	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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:** 

4/15/98

305-385-3555