<u>subject</u>	to a \$ 40	0.00 LATE FEE						-		
	D LIABILIT ANNUAL R 199				erine Hetary of	<b>larris</b> State		FIL SECRETAR DIVISION OF C		
FILING	FEE Anni	ual Report \$100.00	+ \$88.75	Corporation	n Supp	lemental	Fee	99 MAY -3	AH 8:	31
\$ 188.	.75 Ma	ke Check Payable	To: FLOR	RIDA DEPAR	TMEN	OF STA	ΓE			
Name a of Limit	and Mailing Add ted Liability Cor	dress mpany DOCU	IMEN.	Г# м980	0000	00535				
•	TARI IN	TERNATIONA	1a. Principal Place of Business Address							
12921 N.W. 2 STREET #110 PEMBROKE PINES FL 33028								12921 N.W. 2 STREET #110 PEMBROKE PINES FL 33028		
2. Principal Place of Business			2a. Mailing Address					3. Date Organized or Qualified	3a. State	of Formation
Suite, Apt.	# stc		Suite, Ap	Apt. #, etc.				05/28/1998	DE	
Suite, Apt.	. w, wit.		Suite, A	pt. #, 6tc.				4. FEI Number	····	Applied For
City & State		City & State			<del></del> _		51-038 06 98 📅		Not Applicable	
Zip		Country	Zip		Countr	γ		5. Date of Last Report	6. Certific	cate of Status Desired
·									S8 75 Add	itional Fee Required
							Name and Address of New Registered Agent/Office			
¥∕\tri	RDA, YU	IDT				Name				
1292	1 NW 2N	D ST. #110				Street Addr	ess (P	.O. Box Number is Not Acceptat	ole)	
		NES FL 330	28				-	•	•	
						Suite, Apt.	#, etc.			
						City		<u> </u>		MAH.
						City		FL	Zip Code	118
its register	red office or regi	ions of Sections 608.416 stered agent, or both, in the accept the obligations.	and 608.50 e State of Fig	8, Florida Statute orida. Such chan	es, the at ge was a	ove-named I uthorized by a	imited iffirmat	liability company submits this state live vote of a majority of the member	ment for th s. I hereby a	e purpose of changing accept the appointment
•	-									
SIGNATU	IRE	(Registered Agent Accepting	Appointment)	(NOTE Registered Ag	ent signature	required when re	enstating	DATE		
10. Title Managing Members/Managers			Business Street Address			iress	City	State and	Zip Code	
MGR	KOVERI	A, YURI		12921	NW :	2 ST.	#11	.0 PEMBRO	OKE P	INES FL
				1						

File on or before May 1, 1999 or Limited Liability Company will be

}	40	hnnn2965884		
	714	0002865884- -05/06/990110300 ****188.75 ****188		
<u> </u>	 	Florida Statutes. I further certify that the informat		

12921 NW 2 ST. #110

this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an Yuri Koverda

MGR LEVTCHENKO, MARINA

ORF AND TYPEO OF PRINTED NAME OF SIGNING MANAGING MEMBER OF MATIAGER

PEMBROKE PINES FL