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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9600003434 (5)

## FLORIDA INTERNATIONAL TRADE AND ECONOMIC DEVELOP MENT CORPORATION

FILED
Mar 16 1998 8:00am
Secretary of State

A TRACIONI DIA LAMA BIMBARINI ARMI ARMI ARMI ARMI BAKAN MINI AMBRA MINI RIGI MAN

MENT OUR OFFICER															
Principal Place of Business Mailing Address											a escritat sis intersity only only		IUD FIRIF DIGUU	11111 BIDI #BDI	
390 N ORANGE	AVE	3	390 N ORANGE AVE					F	•	Date Incorporated or Qualified					
1300	. –		1	1300						3. Date Incorporated or Qualified					
ORLANDO FL 3	2801		ORLANDO FL 32801					⊢	4	06/26/1996 FEI Number			Cooling Cor		
US		ŧ	US					- 1	₹.			<u> </u>	Applied For		
2. Principal P	lace of Busin	nass		<b>≥a.</b> Maifing	Address						<del>59-34 14370</del>			Not Applicable	
21	1400 01 2001	<u> </u>	26						5.	Certificate of Status Desired		•	Additional Required		
Suite, Apt. #, etc.				Suite, Apt. #, etc.						A	Election Campaign Financing		\$5.00		
22		2	27							Trust Fund Contribution			may be to Fees		
City & State	e		City & State					+	7. Is this nonprofit corporation a homeowners association?						
23				28						Yes No					
Zip				Zip Cou			Country	9 8. This co			This corporation owes or has pe	id the cur	rent year Ir	ntangible	
25			29					<del></del>			Personal Property Tax due June 30.  Yes No				
	f Current Reg	istered A	gent			1		10.	Name and Address of New Re	gistered	Agent				
							81	Nam	В						
	HOMAS P					82	Stree	t Address	s (P.	O. Box Number is Not Acceptal	ole)				
	range av						L			· · · · · · · · · · · · · · · · · · ·					
SUITE 13							83								
ORLAND	O FL 3280	1					84	City					<b>85</b> Zip	Code	
								'				<u> </u>	,		
11. Pursuant	to the provis	ions of Sections	617.0502 and	1617.1508	, Florida Stat	utes, th	vods er	e-name	d corpora	ation	submits this statement for the part of directors. I hereby some	ourpose of	changing	its registered	
agent. I a	m <b>fami</b> liar w	th, and accept t	he obligations	of, Section	n 617.0503, I	Florida	Statute	5.	пропапоп	3 00	oard of directors. I hereby acce	br and abb	ON HATTINGTHE DA	s registered	
SIGNATURE															
	Signature, typed	or printed name of rep			le. (N			ent elgnatu	w beniuper en			DATE	BIGGGG		
12.	00	OFFIC	ERS AND DIR		DELETE		13. 1.1 TITLE		TN		DDITIONS/CHANGES TO OFFICE		Change		
TITLE	PD Anderson, John C										ent		Charge	Abbillon	
							1.2 NAME		LIN	٧.	Fitzgerald .Orange Ave., Si	ا .سان	AND		
STREET ADDRESS 390 N ORANGE AVE SUITE 13 CITY-ST-ZIP ORLANDO FL							1.3 STREET		370	11	to the state of the state of	411W 1			
CITY-ST-ZIP		U FL		<del></del>	DELETE		1.4 CITY - 9	ST-ZIP	Uria	un.	do, FL 32101		☐ Change	Addition	
TITLE	D Marana	ANTONIO D			L Detter		2.1 TITLE						Change	Addition	
NAME	1122 11112 1112 1112						2.2 NAME								
STREET ADDRESS   2655 S LEJEUNE RD STE 608 CITY-ST-ZIP   CORAL GABLES FL							2.3 STREET								
CITY-ST-ZIP		SADLES FL			DELETE		2. 4 CITY -	ST-ZIP					Change	Addition	
TITLE	D D	0			☐ percit		3.1 TITLE						☐ Change	☐ Addition	
NAME	HSU, PA						3.2 NAME								
STREET ADDRESS		Y AVE NW	,				3.3 STREET		·						
CITY-ST-ZIP		<u>alton BCH F</u>	L		DELETE		3.4. CITY - 1	ST-ZIP					Channe	Addition	
TITLE	DAC MR	NUAPA LI			☐ DECEIE		4.1 TITLE						Change	Addition	
NAME					4.2 N				1						
STREET ADDRESS							4.3 STREET							1	
CITY-ST-ZIP	MIAMI FI	•			DELETE	_	4.4 CITY - S	i - ZIP	+				Change	Addition	
TITLE	D	AM IMMES D			C DETECTE		5.1 TITLE						Change	L. AUGILION	
NAME OTTOGET LIBERTOR		OM, JAMES P					5.2 NAME								
STREET ADDRESS		KELL AVE ST	E 1200				5.3 STREET								
CITY-ST-ZIP	MIAMI F	<del>-</del>			DELETE		5.4 CATY - S	T-ZIP	<del>- </del>				Change	☐ Addition	
TITLE	D	1100			☐ DETE IÈ	4	6.1 TITLE						Change	AUUIIIUI	
NAME	SABINES	•	rct				6.2 NAME								
STREET ADDRESS	191/ 17	flagler str	CCI			■ 6	6.3 STAEET	ADDRESS	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), Florida Statutes. I further certify that the information indicated on this annual report or supplied enter a not 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 of the exemption as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if chapter or director of the corporation of t

OMATURE ATT SALE DUNKE LICENSES

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