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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P21160

FIRST INTERNATIONAL FINANCE CORPORATION - A NEVA DA CORPORATION

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90217 004 ***150.00



של סטווי	OURION						
Principal Place	e of Business	Mailing Address			· I INDICAL CONTRACTOR STATE BUILDING AND	11: 0:8: BIBN 0:81 F	1811 SIBIT (SE)
BOX 13309 BOX 13309 MIAMI FL 33101-0309 MIAMI FL 33101-0309					DO NOT WRITE IN T	HIS SPACE	
					3. Date Incorporated or Qualifed	-	
					10/04/1988 4. FEI Number		plied For
— ·	ace of Business	2a. Mailing Address			65-0004735	<u> </u>	Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			ž	\$8.75 A	
22 1717 N.BAySHore Drive 27					5. Certificate of Status Desired	Fee Red	
City & State		City & State		\	6. Election Campaign Financing	\$5.00	May Be
23 MI AM	FIA	28			Trust Fund Contribution	Added to	, Fees
Zip 33	Country 25	Zip	Country		 This corporation owes the current year Personal Property Tax. 	r Intangible ☐ Yes	₩No
24			30		10. Name and Address of New Register		
	9. Name and Address of Curre	nt Registered Agent	81 1	Name	TO. Haire and realists at the tagette	3	
CAR	AZO, KAREN			D	(D.O. Davi Murchas in Not Apportunity)		
1717				ss (P.O. Box Number is Not Acceptable)	4247		
MIAM	AI FL 33132		83	_1	20 200 200		
			84 (Cit.		85 Zip C	`ode
			04 \	City M1A4	6 /	FL ° ' 355	۲۲۶
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above-n	amed comor	ation submits this statement for the numose	of changing its	registered
office or re	egistered agent, or both, in the State of familiar with accept the obligations.	of Florida. Such change was au ations of, Section 607.0505, Flori	ithorized by the ida Statutes.	e corporation	's board of directors. I hereby accept the ap		gistered
SIGNATURE	Lawler					31999	
SIGNATORE			Registered Agent si	gnature required w		<u> </u>	
12.		ND DIRECTORS	13.	·	ADDITIONS/CHANGES TO OFFICERS	Change	Addition
TITLE	PTDS	☐ DELETE	1.1 TITLE			C) onango	
NAME	CARAZO, KAREN 1717 N. BAYSHORE DRIVE #	500-A 42 44	1.2 NAME 1.3 STREET AD	nnacee			
STREET ADDRESS	MIAMI FL	9000 PF 767 7	1.4 CITY-ST-Z				
CITY-ST-ZIP	-CD → D	☐ DELETE	2.1 TITLE	,tr		Change	Addition
NAME	ZAPETIS, MICHAEL E. SR.		2.2 NAME				
STREET ADDRESS	1717 N BAYSHORE DRIVE #3	539 #4247	2.3 STREET AC	DDRESS			
CITY-ST-ZIP	MIAMI FL 33132		2. 4 CITY-ST-2	ZIP		`	
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET AL	DORESS			
CITY-ST-ZIP			3.4. CITY-ST-2	ZIP			(T) A 1.185
TITLE		☐ DELETE	4 1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET AD		·		
CITY-ST-ZIP			44 CITY-ST-Z	ZIP		Change	Addition
TITLE		☐ OELETE	5.1 TITLE 5.2 NAME			☐ Change	
NAME			5.3 STREET AL	nnpegg	•		
STREET ADDRESS							
CITY-ST-ZIP		☐ DELETE	5.4 CITY+ST+Z 6.1 TITLE	LIF		☐ Change	Addition
TITLE			6.2 NAME			□ Change	
NAME			6.2 STOCET AT	nnpegg			

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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

سَد کا آ AME OF SIGNING OFFICER OR DIRECTOR

3-5-381-79JD

Daytime Phone #