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

**PROFIT CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P92000004535 (0)

**FILED** Apr 28 1998 8:00am Secretary of State

VENI	ERRA INTERNATION  e of Business	NAL MANAC	Mailing Ad								
7225 NW 2	STH ST			v 25th st							
	<b>SUITE 203</b> SUITE 203 MIAMI FL 33122-1709 MIAMI FL 33122-1709							DO NOT WRITE IN TH	IIS SPACE		
U\$			US					3. Date Incorporated or Qualified			٦
	_							11/09/1992			
	lace of Business		2a. Mailing	Address		20/	,	4. FEI Number	Α	pplied For	]
21					$\omega \cdot \iota$	2 Stre	$e_{I}$	65-0372192	N	lot Applicable	<u>,</u>
Suite, Apt. 22 <b>7</b> 2(	69 N.W. 12	Street	27	Apt. #, etc.				5. Certificate of Status Desired		Additional lequired	
23 City & State	ANI FZ.	·  .	28 47	State 4+1	FL.			Election Campaign Financing     Trust Fund Contribution		May Be to Fees	
22 1	Country	CA :	Zip □ スス	12/	<u> </u>	US A	4	8. This corporation owes or has paid the		_ ~	Ì
24 33 / 6	9. Name and Address		29 <b>3</b> 2	10-10	30	031	<u> </u>	Personal Property Tax due June 30.  10. Name and Address of New Registers		_] No	-
		o Cullett Ne	Alereien Vi	Join		81 Name		10. Heline and Address of New Hegister	eu Agent		-
TOOL AND CETH OF								EO, JOSEPH F.			╛
7225 NW 25TH ST SUITE 203						82 Street	Addres	ss (P.O. Box Number is Not Acceptable)	<b>L</b>		
	NAMI FL 33122					83	60.1	10:00: Tac Sirece	<del>1</del>		1
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						84 City	liΔ	Ni . A. 33126 F	<b>85</b> Zip	Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE		···	e erro o en de erro		=::					<del></del> -	Ì
12.	Signature typed or printed name of	Ticgislered agent and TICERS AND DI		( [N	OTE: Rogistere	d Agent signature	required	ADDITIONS/CHANGES TO OFFICERS A	-	DC IN 12	ქნ
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STREET ADORESS	•	f	/ \	$/ \backslash /$							
City-St-ZIP	certify that the information	supplied with the	s filing do	not malify		TY-ST-ZIP emption state	l ed in Se	ection 119.07(3)(i), Florida Statutes, Lifurther	certify that the	e information	+
indicated officer or e Block 12 (	on this annual report or so director of the corporation or Block 13 if changed, or	ipplemental ar or the requiver on an attachm	inal report or trustee or ant with an a	s true and a mpowered t address.	o exocuto	d that my sig this report as	nature requir	ection 119.07(3)(i), Florida Statutes. I further shall have the same legal effect as if made red by Chapter 607, Florida Stalutes; and th	under oath; th at my name ap	at Lam an opears in	