SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P92000012891

DAX INTERNATIONAL, INC.

FILED Jul 20, 1999 8:00 am Secretary of State 07-20-1999 90008 006 ***150.00



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Principal Place	of Business	Mailing Address				40101 tidte itent ibite tetat ithi ibut
18840 S. DIXIE 1 MIAMI FL 33157.		-18840 S. DIXIE HWY				
84255W129tenn 84255W129+ mismi, pc 33154 mismi, pc					DO NOT WRITE IN THIS SPACE	
r Carr	33156		3. Date Incorporated or Qualified 12/15/1992			
Principal Place of Business Za. Mailing Address			~		4. FEI Number	Applied For
21 8425 501 129 tenn 26					65-0375736	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
22 27					5. Co	Fee Required
City & State City & State					6. Election Campaign Financing	¬ \$5.00 May Be
23 MIAM. 1-C 28					Trust Fund Contribution L	Added to Fees
¬ Zip 22.	Country	∫ Zip	Country		8. This corporation owes the current ye	
24 <i>JJ</i>	54 25	29	30		Intangible Personal Property. 10. Name and Address of New Regist	
	9. Name and Address of Current	Registered Agent	81 N	ame	To. Name and Address of New Regist	ered Agent
HIRNI	er, robert c	and the second	(*)			
	RED RD	· · · · · · · · · · · · · · · · · · ·	82 S	treet Addre	ddress (P.O. Box Number is Not Acceptable)	
S-211	· · · · · · ·		83			
_	TH MIAMI FL 33143		[89]			
300.			84 C	ity		FL 85 Zip Code
					ation submits this statement for the purpose	
11. Pursuant office or ragent. I a	registered agent, or both, in the State am familiar(with, and accept)the obliga	tions of, section 607.0505, Fig.	orida Statutes.	0	· ¬	£ 50
office or r agent. I a SIGNATURE	registered agent, or both, in the State am familiar (with, and acceptance obligation) Signature, typed or printed name of registered agent	and title if applicable. (NC	OTE: Registered Agent	//W	ired when reinstating)	DATE
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SIGNATURE:

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To whom it may con	cem:
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- 10 d	T RECIEVED This
Second notice and Never finst, we moved bocas	tions. I understand
it is my fault for n	rot Notifying your
office of our new Addre	iss. I'm sonay.
I wrote in the form	our new Address.
	Thank you for
157 - 1 Carp - 17 Carp - 17	
JENNY /	3 lotter.
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