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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

P92000013049 (1) DOCUMENT #

EMEPE INTERNATIONAL, INC.

## **FILED** Mar 09 1998 8:00am Secretary of State

Principal Place of Business	Mailing Address			I IODANODA HIB IBIND NIHIN DONA DUTA DUTA DUTA DISID IN	600 11111 <u>90111 01010 1011 100</u> 3
15310 AMBERLY DRIVE	15310 AMBERLY DRIVE				
SUITE 250	SUITE 250				
TAMPA FL 33647				DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 12/21/1992	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21	26			65-0384414 (OKS	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State	City & State		<del></del>		Fee Required
<del></del>	<b>⊢</b> 1			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Cour	trv	8. This corporation owes or has paid the c	<del></del>
24 25	<b>├</b> ─ '	30		Personal Property Tax due June 30.	Yes No
9. Name and Address of Curre		100		10. Name and Address of New Registered	
MORONTA, JOSE D		1	Name		
18110 ASHTON PARKWAY		ļ.,	32 Street Addr	ress (P.O. Box Number is Not Acceptable)	
TAMPA FL 33647			Street Addr	ess (F.O. Box Number is Not Acceptable)	
Transfer Gooti		Ī	33		
		ļ.			
		ľ	City	F:	L 85 Zip Code
11. Pursuant to the provisions of Sections 607.05	02 and 607 1508, Florida Statute	es, the ab	ove-named corp	poration submits this statement for the purpose	of changing its registered
office or registered agent, or both, in the Stat agent. I am familiar with, and accept the obti	e of Florida. Such change was a nations of Section 607.0505. Flo	authorized orida Statu	by the corporat	tion's board of directors. I hereby accept the ap	pointment as registered
,					
SIGNATURE Signature, typed or printed name of registered in	gent and little if applicable (NOTE	Registered	Agent signature requir	rod when reinstalling) DATE	
	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	☐ DELETE	1.1 TITL	E		☐ Change ☐ Addition
NAME MORONTA, JOSE D		1.2 NAN	AE		
STREET ADDRESS 18110 ASHTON PARK WAY		1.3 STR	EET ADDRESS		i
City-st-zip TAMPA FL 33647	The see		r-ST-ZIP	**	
TITLE	☐ DELETE	2.1 THTL			Change Addition
NAME		2.2 NAA	1		
STREET ADDRESS			EE1 ADDRESS	·	
CITY-ST-ZIP	DELETE	_	Y-ST-ZIP		Change Addition
TITLE	☐ DELETE	3.1 T(T)			Change Mounton
NAME		3.2 NAA	]		
STREET ADDRESS		i i	EET ADDRESS		
CITY-ST-ZIP	DELETÉ	3.4. CIT 4.1 TITA	Y-ST-ZIP		Change Addition
TITLE	☐ nereit		·		C Cutada C Maniton
NAME		4. 2 NAI			
STREET ADDRESS			EET ADDRESS		
CITY-ST-ZIP	DELETE	4.4 CITY 5.1 TITL	r-ST-ZIP	W-5- 11/11	Change Addition
TITLE	בין טנננוג				The customer in the control of
NAME OTDEST ADDRESS		5.2 NAN			
STREET ADDRESS			EET ADDRESS		
CITY-ST-ZIP	DELETE	5.4 CITY 6.1 TITL	'-ST•ZIP	· · · · · · · · · · · · · · · · · · ·	Change Addition
TITLE	[ Decent				
NAME		6.2 NAN			
STREET ADDRESS			EET ADDRESS		1
CITY-ST-ZIP	with this filing dose not available		r-ST-ZIP	Section 119 07(3)(i) Florida Statutas I further (	partify that the information

Indicated on this annual report or supplied with rins tiling does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 attackment with an address.

OSE .)). MORONTA

(813) 9758505