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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCLMENT # 792000013049

EMEPE International, Inc.

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90142 016 ***150.00

Principal Place of	of Business	Mailing Address							
IRINA	Sugar Branko No	PARA	x 462	12					
18103 Sugar Brooke Dr. Tampa, FL 33647		P.O.Box 46218		BO NOT WRITE IN THE OPAGE					
		Tampa, F.L 33647-010:2			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				
•	•	•				21~ 1992			
2. Principal Place	ce of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · ·		4. FEI Nuniber	<u>~ ~ </u>	<u> </u>	Appl	ied For
2. Frincipal lace of business		26			384414	<u> </u>	+	pplicable	
Suite, Apr. #, etc.		Suite, Apt. #, etc.				\$8.7	\$8.75 Additional		
22		27		5. Certifcate of Status Desired			Fee Required		
City & State		City & State		6. Election Campaign Financing		\$5.	\$5.00 May Be		
3		28			Trust Fund Contribution Added to Fees			•	
Zip Country		Z ₁ p Country		8. This corporation owes the current year Intangible					
4 25		29 30		Persona Property Tax.				No	
	9. Name and Address of Curren	t Flegistered Agent			10. Name and Add	ress of New Registe	red Agent		
Ma	S-UEA JOSE	N	81	Name					
1410	RONTA, JOSE ? 08 Sugar Bro	· .	82	Street Addre	ess (P.O. Box Number	is Not Acceptable)			
181	08 Sugar Bro	ooke Dr.							
-T'.	mpa, FL 3364	·*7	83						
100	mital, FL 236=	t /	84	City		 	85	Zip Co	de
	•)		F	=L. °° '		
11. Pursuan to	the provisions of Sections 607.0502 stered agent, or both, in the State of	2 and 607.1508, Florida St	tatut∈s, the abov	e-named corr c	oration submits this sta	tement for the purpose	e of changing	g its re	gistered
~6E~~ ~~:			as at monzeurby		n siboard of directors.	i nereby accept the at	po nunem a	is regis	e e e e u
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agent. Lam f SIGNATURE			, Flor da Statutes	s. '	when reinstating)	DATE			
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SIGNATURE:

SIGNATURE: AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jose D. Morovita

4/21/99

813) 994-9690

E sytime Phone #