## 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

DOCUMENT # P93000016257 (6)

| SALUM INTERNATIONAL RESOURCES, INC.  |  |                                       |                    |                               |   |                     |
|--|--|---------------------------------------|--------------------|-------------------------------|---|---------------------|
|  |  |                                       |                    |                               | # 1881/1011 HR #HIRD WHIN DENKE BOILD ##HH #HIRD HI |                     |
| Principal Place  | o of Rusinoss                                      | Mailing Address                       |                    |                               |   | <u> </u>            |
| ·  |  |                                       |                    |                               | İ   |                     |
| 5803 TOLMAN COURT   5803 TOLMAN COURT   TAMPA FL 33647-1011   TAMPA FL 33647-1011  |  |                                       |                    |                               |   |                     |
| IAMPA FL SA  | p4/-1011   | TAMPA PL 33047-1011                   |                    |                               | DO NOT WRITE IN THIS                                | S SPACE             |
|  |  |                                       |                    |                               | 3. Date Incorporated or Qualified                   |                     |
|  |  |                                       |                    |                               | 03/01/1993  |                     |
|  | ace of Business                                    | 2a. Mailing Address                   |                    |                               | 4. FEI Number                                       | Applied For         |
| 21   |  | 26                                    |                    |                               | 59-3168620  | Not Applicable      |
| Suite, Apt. #, etc. Suite, Apt. #, etc.  |  | Suite, Apt. #, etc.                   |                    |                               | 5. Certificate of Status Desired                    | \$8.75 Additional   |
| 27   |  |                                       |                    | g, commodic of class position | Fee Required  |                     |
| City & State   |  | City & State                          | City & State       |                               | 6. Election Campaign Financing                      | \$5.00 May Be       |
| 23   |  | 28                                    |                    |                               | Trust Fund Contribution                             | Added to Fees       |
| Zip  | Country  | 7 (p                                  | Country            |                               | 8. This corporation owes or has paid the o          |                     |
| 24   | [25]   | 29 3                                  | 0]                 | <del> </del>                  | Personal Property Tax due June 30.                  | Yes No              |
|  | g, Name and Address of Currer                      | it Registered Agent                   | 81                 | Name                          | 10. Name and Address of New Registere               | a Agent             |
|  | YER, GARY  |                                       | 6'                 | Mairie                        |   |                     |
| 5803 TOLMAN COURT  |  |                                       | 82                 | Street Add                    | fress (P.O. Box Number is Not Acceptable)           |                     |
| TAN  | APA FL 33647-1011                                  |                                       | 83                 |                               |   |                     |
|  |  |                                       | 65                 |                               |   |                     |
|  |  |                                       | 84                 | City                          | F   | 85 Zip Code         |
| 11. Pursuant t   | to the provisions of Sections 607 050              | 2 and 607 1508 Florida Statutes       | the above          | -named cor                    |   |                     |
| 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. |  |                                       |                    |                               |   |                     |
|  | ті тапінаг мілі, апо ассері тле обіід              | аполя от, беспол орг.0505, гют        | oa Statutes        | •                             |   |                     |
| SIGNATURE  | Signature, typed or printed name of registered agr | and and title if applicable (NOTE: \$ | Registered Age     | nt signalure requ             | uired when reinstating) DATE                        | <del></del>         |
| 12.  | OFFICERS AN  |                                       | 13.                |                               | ADDITIONS/CHANGES TO OFFICERS AT                    | ND DIRECTORS IN 12  |
| TITLE  | D  | DELETE                                | 1.1 TITLE          |                               | · · · · · · · · · · · · · · · · · · ·               | Change Addition     |
| NAME   | SALUM, CARLOS M 12                                 |                                       | 1.2 NAME           |                               |   |                     |
| STREET ADDRESS   | 5803 TOLMAN COURT                                  |                                       | 1.3 STREET         | ADDRESS                       |   |                     |
| CITY-ST-ZIP  | TAMPA FL 33647-1011                                |                                       | 1.4 CITY-S         | r-zip                         |   |                     |
| TITLE  |  | ☐ DELETE 2.1                          |                    |                               |   | ☐ Change ☐ Addition |
| NAME   | 2.   |                                       | 2.2 NAME           |                               |   |                     |
| STREET ADDRESS   |  |                                       | 2.3 STREET ADDRESS |                               |   |                     |
| CITY-ST-ZIP  |  |                                       | 2.4 CITY-ST-ZIP    |                               |   |                     |
| TITLE  | ☐ DELETE   |                                       | 3.1 TITLE          |                               |   | ☐ Change ☐ Addition |
| NAME   |  |                                       | 3.2 NAME           |                               |   |                     |
| STREET ADDRESS   |  |                                       | 33 STREET          | ADDRESS                       |   |                     |
| CFTY-ST-ZIP  |  |                                       | 3.4. CITY-S        | T-ZIP                         |   |                     |
| TITLE  |  | DELETE                                | 4.1 TITLE          |                               |   | Change Chaddition   |
| NAME   |  |                                       | 4 2 NAME           | 1                             |   |                     |
| STREET ADDRESS   |  |                                       | 4.3 STREET         | ADDRESS                       |   |                     |
| CITY - ST - ZIP  |  |                                       | 44 CITY-ST         | r-zip                         |   |                     |
| TITLE  |  | DELETE                                | 51 TITLE           |                               |   | Change Addition     |
| NAME   |  |                                       | 52 NAME            |                               |   | ļ                   |
| STREET ADDRESS   |  |                                       | 53 STREET          | ADDRESS                       |   |                     |
| CITY-ST-ZIP  |  | - ····                                | 54 CITY-\$         | - ZIP                         |   |                     |
| TITLE  |  | ☐ DELETE                              | 61 TITLE           |                               |   | Change Addition     |
| NAME   |  |                                       | 62 NAME            |                               |   |                     |
| STREET ADORESS   |  |                                       | 6.3 STREET         |                               |   |                     |
| CITY-ST-ZIP  |  |                                       | 6.4 CiTY-S1        | -ZIP                          |   |                     |

14. Thereby 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer of director of the corporation or the receiver of 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.

SIGNATURE:

**FILED** 

May 11 1998 8:00am

Secretary of State