FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000024475 (4)**

1. Corporation Name

CEIUSA INTERNATIONAL CORPORATION

Principal Place of Business

8257 NW 56TH STREET
MIAMI FL 33166
US

Mailing Address

8257 NW 56TH STREET
MIAMI FL 33166
US

3. Date Incorporated or Qualified: 03/29/1993

3a. Date of Last Report: 07/21/1995

4. FEI Number: 52-1820366 — Applied For / Not Applicable

5. Certificate of Status Desired: xx — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: ☐ — **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: ☐ Yes ☐ No

2. Principal Place of Business

21 8501 NW 17 St.
Suite, Apt. #, etc. 22 Suite 126
City & State 23 Miami, Florida
Zip 24 33126 Country 25 USA

2a. Mailing Address

26 8501 NW 17 St.
Suite, Apt. #, etc. 27 Suite 126
City & State 28 Miami, Florida
Zip 29 33126 Country 30 USA

9. Name and Address of Current Registered Agent

PACHECO, PAULO C
8257 NW 56TH STREET
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
8501 NW 17 St. Ste 126

83

84 City: Miami FL 85 Zip Code: 33126

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. This 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

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	PACHECO, PAULO C	
STREET ADDRESS	8257 NW 56 STREET	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	☐ DELETE
NAME	WANNEMACHER, ANA P.	
STREET ADDRESS	8257 NW 56TH STREET	
CITY-ST-ZIP	MIAMI FL	
TITLE	EM	☐ DELETE
NAME	WANNEMACHER, NATHAN P.	
STREET ADDRESS	8257 NW 56TH STREET	
CITY-ST-ZIP	MIAMI FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		xx Change ☐ Addition
12 NAME		
13 STREET ADDRESS	8501 NW 17 St. Ste 126	
14 CITY-ST-ZIP	Miami, FL 33126	
21 TITLE		xx Change ☐ Addition
22 NAME		
23 STREET ADDRESS	8501 NW 17 St. Ste 126	
24 CITY-ST-ZIP	Miami, FL 33126	
31 TITLE		xx Change ☐ Addition
32 NAME		
33 STREET ADDRESS	8501 NW 17 St. Ste 126	
34 CITY-ST-ZIP	Miami, FL 33126	
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied herein, to the extent required, accurately furnished and does not qualify for the exemption stated in Section 119.07(3)(s), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 attached sheet with an address.

SIGNATURE: Nathan Wannemacher — 3/12/96 — (305)592-0021

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number