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 # P93000059138

CANNONTEX INTERNATIONAL, INC.

FILED Sep 22, 1999 8:00 am Secretary of State

09-22-1999 90012 044 ***550.00

Principal Place of Business	Mailing Address		- I SEDISTAN SIM IBIBA ISUR ARITA ARITI ARITI ARITI	A BEBE BESTE LOUGH THOOR STIDS INTO SOUS
21059 SWEETWATER LANE NORTH 21059 SWEETWATER LANE NORTH		ORTH		
BOCA RATON FL 33428-1027 BOCA RATON FL 33428-1027			DO NOT WOITE IN 3	THE SPACE
			DO NOT WRITE IN 1 3. Date Incorporated or Qualified	HIS SPACE
			08/09/1993	
	Da. Maillea Addessa		4. FEI Number	Applied For
2. Principal Place of Buginess 21 5030 Champion Bluc	2a. Mailing Address	twater Lun	65-0435752	Not Applicable
	9 26 2/05 7 500 CC Suite, Apt. #, etc.	704711		\$8.75 Additional
Suite, Apt. # etc.	27 Suite, Apr., #, etc.		5. Certificate of Status Desired	Fee Required
22 5017 5 D = 5	Qity & State		6. Election Campaign Financing	\$5.00 May Be
City & State RU-OU FL	28 BOCG KUto	n FL	Trust Fund Contribution	Added to Fees
Zip_ Zip_ Country	7:-	Country	8. This corporation owes the current year	
33476 25 C) S.A	33428 30	113A	Intangible Personal Property.	Yes No
9, Name and Address of Curren	<u> </u>	γο,,	10. Name and Address of New Register	red Agent
		81 Name		
ESGUERRA, JUAN C	•	93 Street Addre	ess (P.O. Box Number is Not Acceptable)	
21059 SWEETWATER LANE NORTH 82 Street Addr			ess (P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33428		83	· · · · · · · · · · · · · · · · · · ·	
			<u> </u>	as 7:- Code
		84 City		FL 85 Zip Code
11. Pursuant to the provisions of sections 607.050	2 and 607 1508. Florida Statutes, f	he above-named corpor	ration submits this statement for the purpose	of changing its registered
office or registered agent or both in the State	of Florida. Such change was autt	iorized by the corporatio	on's board of directors. I hereby accept the a	ppointment as registered
agent. I am familiar with, and accept the obligi	ations of, section 607.0505, Fiorid	a Statutes.		
SIGNATURE	nt and title if applicable. (NOTE:	Registered Agent signature requi	tired when reinstating)	TE
	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE PSTD	DELETE	1.1 TITLE SC	chelary, (s)	Change X Addition
NAME ESGUERRA, JUAN C	-	1.2 NAME	eidi Miller 30 Champion Blud - 5/03 ca Retou FL 33496	Oda alsh channe
STREET ADDRESS 21059 SWEETWATER LANE N	IORTH	1.3 STREET ADDRESS 50	30 Champion Blud - 3/03	- FULL CIUD GIIGIGES
CITY-ST-ZIP BOCA RATON FL 33428-1027		1.4 CITY-ST-ZIP	ca Ratou FL 33496	
TITLE	DELETE	2.1 TITLE		Change Addition
NAME		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		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE	-	Change Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP	·	4.4 CITY-ST-ZIP		<u> </u>
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		F 2 OTDEET 4 DODEEC		
		5.3 STREET ADORESS		
C/TY-\$T-7IP		5.4 C!TY-ST-ZIP		
CITY-ST-ZIP TITLE	DELETE			Change Addition
TITLE	DELETE	5.4 CITY-ST-ZIP		Change Addition
NAME SO THE STATE OF THE STATE	_	5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		Change Addition
TITLE	_	5.4 CITY-ST-ZIP 6.1 TITLE	<u> </u>	Change Addition

indicated on this annual report of 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 of 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 chapter 6, or on an attachment with an address.

SIGNATURE:

561 997297