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PROFIT CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000078906 (3)

COMMODITIES INTERNATIONAL GROUP, INC.

Principal Place of Business Mailing Address 8485 NW 74TH ST P.O. BOX 821098 MIAMI FL 33166 SOUTH FLORIDA FL 33082-1098 2. Principal Place of Business 2a. Mailing Address 21 Suite, Apt. #, etc. Suite, Apl. #, etc.

FILED Mar 16 1998 8:00am Secretary of State

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/15/1993 4. FEI Number Applied For 65-0606238 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Ζıp Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 25 Personal Property Tax due June 30. 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent LONDON, MARK S Name 4030-C SHERIDAN ST Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 83 85 Zip Code 84 is, the above-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered brida Statutes. 11. Pursuant to the pro FICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change ☐ Addition TITLE 1.1 TITLE CAPT, WILLIAM MARION 1.2 NAME NAME P.O. BOX 821098 1.3 STREET ADDRESS STREET ADDRESS SOUTH FLORIDA FL 33082-1098 1.4 CITY-ST-ZIP CHTY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIF 2.4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADORESS 33 STHEET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE 4.1 TITLE ■ Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Addition 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5 4 CHTY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITI F 61 THILE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP Thereby certify that the information supplied with this filing does not qualified and indicated on this annual report or supplemental artifact report is tructed indicated on this annual report or supplemental artifact report is tructed or provided.

nos not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information t is truce and account at my signature shall have the same legal effect as if made under oath; that I am an only of however to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in additions. officer or director of the corporation or the recover or true Block 12 or Block 13 if changed of on an placeburn will

SIGNATURE: