FILED Jun 07, 2004 8:00 am Secretary of State

FOR PROFIT CORPORATION

0	HILOUM DOOME	OU HER UIT	100	06-07-2004 90006 028 ***150.00
DOCUMENT # P93000087154 1. Entity Name				
JADE	INTERNATIONAL, CO	ORP.		
DO NOT WRITE IN THIS SPACE				14023478
1 0 1 5 5 Suite, Apt.	ace of Business Collins Ave.	3. Mailing Address Same as pr Suite, Apt. #, etc.	incipal	DO NOT WRITE IN THIS SPACE
#303 City & State		City & State	·	4. FEI Number Applied For
Zip	Beach, FL Country	Zip	Country	5. Certificate of Status Desired Security Securi
33154	USA			7. Name and Address of Current Registered Agent
			Name	
	DO NOT W	RITE	Street Address	ALDO RAFAEL A RATA (PO. Box Number is Not Acceptable)
	IN THIS SP	ACE		
			10155 City	Collins Ave. #303
			<u>Miam</u>	i Beach, L 33159
8. The above	named entity submits this statement (r the purpose of changing its	registered office or regist	ered agent, or both, in the State of Florida.
SIGNATURE CLUB (CLC) Signature, typed or punised name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE				
9. This.corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) January 1 May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State				10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
11.	OFFICERS AND	DIRECTORS		
TITLE NAME	P/S/T/D	TIT 3	TITLE NAME	
STREET ADDRESS	RAIA, ALDO RAFAI		STREET ADDRESS	
CITY-ST-ZIP	Miami Beach, FL		CITY-ST-ZIP	
TITLE NAME	V-P/D _RAIA,, SUMAIA L.		TITLE NAME	
STREET ADDRESS CITY+ST-ZIP	10155 Collins Av	ve. #301	STREET ADDRESS' CITY-ST-ZIP	
TITLE	- 111 (HILL - 100 (LI) - 110 (HILL - 100 (HIL	,	TITLE	
NAME				
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STREET ADDRESS City-St-Zip				DO NOT WRITE
CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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13. I hereby 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 report or supplemental 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 11 or on an attachment with an address, with all other, like empowered.

SIGNATURE:

All. R.A. Gaia

Ostachment

Jade International, Corp. 10155 Collins Ave #303 Miami Beach, FL 33154

#P93000087154

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: P93000087154

I am writing to you because I did not receive the 2004 annual report for my business. I became aware of your new change in procedures when I contacted your office. I do not recall receiving the post card alerting the annual report. I ask that you please waive the penalty in the amount of \$400.00 and accept my renewal fee in the amount of \$150.00, since I do not have the money to pay for the penalty. I hope that you take this all into consideration.

Thanking you in advance for your cooperation with this matter,

Aldo R.A. Raia