## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9400003041 (8)

CHRISTIAN L. INTERNATIONAL, INC.

Principal Place of Business
335 POINCIANA ISLAND DR
N MIAMEREACH FL 33154

Mailing Address

335 POINCIANA ISLAND DR N MIAMI BEACH FL 33154

## FILED Jan 15 1997 8:00am Secretary of State



					<ol> <li>Date Incorporated or Qualified 01/12/1994</li> </ol>	3a. Date o 01/26/		port
2. Principal Pla	ace of Business	28. Mailing Address			4. FEI Number		App	plied For
13499		26			NOT APPLICABLE			t Applicable
Suite, Apt ≠	ŧ, etc. <b>u</b>	Suite, Apt. #, etc.			5. Certificate of Status Desired	_ <b>\$</b>	<b>8.75</b> A Fee Re	
City & State		City & State			6. Election Campaign Financing		\$5.00	May Be
53 NOVA	n Miamu Florida	- 28			Trust Fund Contribution		Added to	Fees
<sup>Z(p)</sup> 33\8	Country	Zφ	Country	<i>(</i>	8. This corporation has liability for			199 032,
24 55/8	\  25	29	30		Florida Statutes  10. Name and Address of New Re	Yes N		
		. Hegistered Agent	81	Name	TO. Name and Address of New A	Misteran Wha	***	
Leuzzi, noreen 335 poinciana island dr				I Ivarie				
				82 Street Address (P.O. Box Number is Not Acceptable)				
N MIAMI BEACH FL 33154			83					<del></del>
			83					
			84	City		F1 8	5 Zip (	Code
				<u></u>	orporation submits this statement for the	FL [		
office or re agent. I ar	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was	authorized b	y the corpo	ration's board of directors. I hereby acce	pt the appoint	ment as	registered
SIGNATURE	Styrature Aypeauripe well same of requirered ager	at and title Tappercable (NC	TF. Registered Ac	ant eignoture re	quired when reinstaling)	DATE		
				en signature to				C IN 12
12.	OFFICERS AND	DIRECTORS	13.	en syname is	ADDITIONS/CHANGES TO OFFI			_
12. Till.E	0			eri signature to	ADDITIONS/CHANGES TO OFFI		RECTOR Change	_
	O LEUZZI, NOREEN	DIRECTORS	13.	eri signature to	ADDITIONS/CHANGES TO OFFI			_
TITLE	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DIRECTORS	13. 1 1 TITLE 1.2 NAME	T ADDRESS	ADDITIONS/CHANGES TO OFFI			_
TITLE NAME	O LEUZZI, NOREEN	DIGIRECTORS  DELETE	13. 11 TITLE 12 NAME 1.3 STREE 1.4 CITY-	T ADDRESS	ADDITIONS/CHANGES TO OFFI		Change	Addition
TOLE NAME STREET ADDRESS	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DIRECTORS	13. 1 1 TITLE 12 NAME 1.3 STREE	T ADDRESS	ADDITIONS/CHANGES TO OFFI			Addition
TOLE  NAME  STREET ADDRESS  CITY+ST-7IP	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DIGIRECTORS  DELETE	13. 11 TITLE 12 NAME 1.3 STREE 1.4 CITY-	T ADDRESS	ADDITIONS/CHANGES TO OFFI		Change	Addition
NAME STREEL ADDRESS CITY-ST-7IP TITLE	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DIGIRECTORS  DELETE	13. 11 TITLE 12 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME	T ADDRESS	ADDITIONS/CHANGES TO OFFI		Change	Addition
TOLE  NAME  STREEL ADDRESS  CITY-ST-7IP  TITLE  NAME	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	O DIRECTORS  DELETE  DELETE	13. 11 TITLE 12 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME	T ADDRESS ST-ZIP T ADDRESS	ADDITIONS/CHANGES TO OFFI		Change Change	Addition
NAME STREEL ADDRESS CITY-ST-7IP TITLE NAME STREEL ADDRESS	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DIGIRECTORS  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE	T ADDRESS ST-ZIP T ADDRESS	ADDITIONS/CHANGES TO OFFI		Change	Addition
TOLE  NAME  STREEL ADDRESS  CITY-ST-7IP  TITLE  NAME  STREEL ADDRESS  CITY-ST-7IP	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	O DIRECTORS  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2.4 CITY-	T ADDRESS ST-ZIP T ADDRESS	ADDITIONS/CHANGES TO OFFI		Change Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TIFLE NAME STREET ADDRESS CITY-ST-ZIP TIFLE	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	O DIRECTORS  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2.4 CITY- 31 TITLE 32 NAME	T ADDRESS ST-ZIP T ADDRESS	ADDITIONS/CHANGES TO OFFI		Change Change	Addition
TOTE  NAME  STREET ADDRESS  COTY+ST-7IP  TITLE  NAME  STREET ADDRESS  CITY-ST-7IP  TOTLE  NAME  STREET ADDRESS  CITY-ST-7IP  TOTLE  NAME  STREET ADDRESS  CITY-ST-7IP	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DITURE CTORS  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2.4 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY-	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  T ADDRESS	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition
TITLE NAME STREEL ADDRESS COTY-ST-ZIP TITLE NAME STREET ADDRESS COTY-ST-ZIP TOTLE NAME STREET ADDRESS COTY-ST-ZIP TOTLE NAME STREET ADDRESS COTY-ST-ZIP TOTLE	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	O DIRECTORS  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2.4 CITY- 3.1 TITLE 32 NAME 33 STREE 34 CITY- 4.1 TITLE	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change	Addition  Addition
TOTE  NAME  STREET ADDRESS  COTY+ST-7IP  TITLE  NAME  STREET ADDRESS  CITY-ST-7IP  TOTLE  NAME  STREET ADDRESS  CITY-ST-7IP  TOTLE  NAME  STREET ADDRESS  CITY-ST-7IP	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DITURE CTORS  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2. 4 CITY- 3.1 TITLE 32 NAME 33 STREE 34 CITY- 4.1 TITLE	I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DITURE CTORS  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2. 4 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY- 4.1 TITLE 4. 2 NAMI 4.3 STREE	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  T ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition
TITLE NAME STREET ADDRESS CUTY-ST-ZIP	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DELETE  DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2. 4 CITY- 31 TITLE 32 NAME 33 STREE 34. CITY- 4.1 TITLE 4. 2 NAMI 4.3 STREE 4.4 CITY-	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  T ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition  Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-7IP  TITLE  NAME  STREET ADDRESS  CITY-ST-7IP  TITLE  NAME  STREET ADDRESS  CITY-ST-2IP  TITLE  NAME  STREET ADDRESS  CITY-ST-2IP  TITLE  NAME  STREET ADDRESS  CITY-ST-2IP  TITLE  NAME	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DITURE CTORS  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2. 4 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY- 41 TITLE 4. 2 NAMI 4.3 STREE 4.4 CITY- 5.1 TITLE	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  T ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition  Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TOTLE  NAME	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DELETE  DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2. 4 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY- 4.1 TITLE 4. 2 NAMI 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition  Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TOTLE  NAME	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DELETE  DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2. 4 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY- 41 TITLE 4 2 NAMI 43 STREE 44 CITY- 51 TITLE 5.2 NAME 5.3 STREE	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition  Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-7IP  TITLE  NAME  STREET ADDRESS  CITY-ST-7IP  TOTLE  NAME  STREET ADDRESS  CITY-ST-7IP  TOTLE  NAME  STREET ADDRESS  CITY-ST-7IP  TOTLE  NAME  STREET ADDRESS  CITY-ST-7IP  TITLE  NAME  STREET ADDRESS  CITY-ST-7IP  TITLE  NAME  STREET ADDRESS  CITY-ST-7IP	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DELETE  DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2. 4 CITY- 31 TITLE 32 NAME 33 STREE 34 CITY- 41 TITLE 4. 2 NAMI 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-	T ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition  Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DELETE  DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2. 4 CITY- 3.1 TITLE 32 NAME 33 STREE 34 CITY- 4.1 TITLE 4.2 NAMI 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- 6.1 TITLE	I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition  Addition  Addition
TITLE NAME STREEL ADDRESS COTY-ST-ZIP TITLE NAME STREEL ADDRESS COTY-ST-ZIP TOTLE NAME STREET ADDRESS COTY-ST-ZIP TOTLE NAME STREET ADDRESS COTY-ST-ZIP TOTLE NAME STREET ADDRESS COTY-ST-ZIP TITLE NAME STREET ADDRESS COTY-ST-ZIP TITLE NAME STREEL ADDRESS COTY-ST-ZIP TITLE NAME STREEL ADDRESS COTY-ST-ZIP TITLE NAME	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DELETE  DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2. 4 CITY- 3.1 TITLE 32 NAME 33 STREE 34 CITY- 4.1 TITLE 4.2 NAMI 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 6.1 TITLE 6.2 NAME 6.1 TITLE 6.2 NAME	I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition  Addition  Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D LEUZZI, NOREEN 335 POINCIANA ISLAND DR	DELETE  DELETE  DELETE  DELETE	13. 11 TITLE 12 NAME 13 STREE 14 CITY- 21 TITLE 22 NAME 23 STREE 2. 4 CITY- 3.1 TITLE 32 NAME 33 STREE 34 CITY- 4.1 TITLE 4.2 NAMI 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME 5.3 STREE 6.1 TITLE 6.2 NAME 6.1 TITLE 6.2 NAME	I ADDRESS ST-ZIP  I ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFI		Change Change Change	Addition  Addition  Addition  Addition  Addition

I do hereby certify that the information sceptified 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 or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that name officer or director of the corporation of the roce were or true to 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 by on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

Daytine Phone #

OC 40044