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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporation No.	EN # P940 NTERNATIONAL CORI	00000 9 557 (<i>1</i> °.	()								
Principal Place of	Business	Mailing Address				- I TOUTION THE SPECT MINISTERS AND TO MAKE AND THE POST OF THE	,,,,,,	HOL BIOM IN BEIN			
8067 N.W. 66TH ST. MIAMI FL 33166		8067 N.W. 66TH ST. MIAMI FL 33166				DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualified 02/07/1994	•				
2. Principal Place of Business		2a. Mailing Address				4. FEI Number	T	Applied F			
21		26	26			65-0465874	Д.	Not Applic			
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	 			5. Certificate of Status Desired See Regulred					
City & State		City & State	⊢ ₁ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			B. Election Campaign Financing Trust Fund Contribution Added to Fee					
Zip 24	Country 25	Ziρ Country 29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.					
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
ROMERA, LUIS				1	Name						
8067 N.W. 66TH ST. MIAMI FL 33166			\	2	Street Addre	dress (P.O. Box Number is Not Acceptable)					
****			Ē	3	****. =						
			1	14	City	FL	85	Zip Code			
11. Pursuant to the office or regis agent. I am fa	ne provisions of Sections 607 stered agent, or both, in the S amiliar with, and accept the o	.0502 and 607.1508, Florida Statate of Florida Such change was bligations of, Section 607.0505,	atutes, the abo as authorized Florida Statu	by by les.	named corporation	oration submits this statement for the purpose of clon's board of directors. I hereby accept the appoin	hang ntmer	ing its regi			

officer or director of the corporation or the receiver or trustee empowered to execute this repo Block 12 or Block 13 if changed, or on an attachment with an address.

FILED Feb 17 1998 8:00am Secretary of State



Applied For Not Applicable \$8.75 Additional

\$5.00 May Be Added to Fees

INICAM I E 00 100												
			63									
	•		84	City	FL	85	Zip C	ode				
office or r	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was auth	rorized by	the corr	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the appo	changir intmen	ng its it as r	registered egistered				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE												
12.	OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12											
TITLE	D	DELETE	1.1 TITLE			Char	nge	Addition				
NAME	Romera, Luis		1.2 NAME	ŀ								
STREET ADDRESS	8067 N.W. 66TH ST.		1.3 STREET	ADDRESS								
CITY-ST-ZIP	MIAMI FL 33166		1.4 CITY - S	r- 2 1P								
TITLE		DELETE	2.1 TITLE			Char	nge	Addition				
NAME			2.2 NAME									
STREET ADDRESS			2.3 STREET	address								
CITY-ST-ZIP			2.4 CITY-S	1 - ZIP								
TITLE		☐ DELETE	3.1 TITLE		[Char	ige	☐ Addition				
NAME			3.2 NAME	j	j							
STREET ADDRESS			9.3 STREET	address								
CITY-ST-ZIP			3.4. CHTY - S	r-ZIP								
TITLE		DELETE	4.1 TETLE			Chan	ige	☐ Addition				
NAME			4. 2 NAME	1								
STREET ADDRESS			4.3 STREET	ADDRESS								
CITY-ST-ZIP			4.4 CITY-S1	- 2 IP								
TITLE		DELETE	5.1 TITLE		[Chan	ige	Addition				
NAME			5.2 NAME									
STREET ADDRESS			5.3 STREET	ADDRESS								
CITY-ST-ZIP			5.4 Criy-Si	- ZIP				·				
TITLE		DELETE	61 TITLE		L	Chan	i g e	Addition				
NAME			6.2 NAME	Ì								
STREET ADDRESS			6.3 STREET	ADORESS								
CITY-ST-ZIP		al la Allian alana and a supply of the	64 CITY ST		16 00 11 440 07(0)() Firstly 044 44 (5 1)	77 . 16 . 4						
14. 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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												