FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

Secretary of State 1996 DIVISION OF CORPORATIONS								
DOCU 1. Corporation		00002711						
J.I.R.	INTERNATIONAL, INC.		• •					
		==						i d i 11 11 118 118 118 118 118 118 118 118 118 118 118 118 118 118 118 118
Principal Place of Business Mailing Address								19) (100) 160) (10)
4995 NW 79TH AVE Suite 114 Miami Fl 33166 US		SUITE 114 Miami fl 3	4995 NW 79TH AVE Suite 114 Miami FL 33166 US			Date Incorporated or Qualified 3a. Date of Last Report		
2. Principal P	lace of Business					04/07/1994	3a. Date of L 05/0	ast Report 1/1995
21	icide of pusitiess	2a. Mailing Add	dress			4. FEI Number 65-0485198		Applied For
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.				\$1	Not Applicable 3.75 Additional
City & Stat	6	City & State				5. Certificate of Status Desired		Fee Required
Z ip		28				Election Campaign Financing Trust Fund Contribution	□ \$	5.00 May Be Added to Fees
4	Country 25	Ζιρ [29]	30	ountry	У	8. This corporation has liability for i	ntangible tax und	ers 199.032,
	9. Name and Address of Cu	rrent Registered Agen	1301	Г		Florida Statutes Yes 10. Name and Address of New R	No	
0.4074				81	Name	To Addicas of New A	egistereo Agen	
	NO, IVAN /EST FLAGLER STREET				Street Add	eet Address (P.O. Box Number is Not Acceptable)		
	FL 33135				1.			
				83				
				84			85	Zip Code
 Pursuant to or register 	to the provisions of Sections 607.0 red agent, or both, in the State of F	502 and 607.1508, Florid	la Statutes, the al	_L	L named corpo	ration submits this statement for the purp rd of directors. I hereby accept the appo	OSE of changing	its registered affice
	th, and accept the obligations of, S	Section 607.0605, Florida	Statutes.	corp	oration's boa	ard of directors. I hereby accept the appo	intment as regist	ered agent. I am
SIGNATURE:	Signature, typed or printed name, of regista sol a	sout are three lacks as to	4957		5 proces (1000)			
2.	OFFICERS AND DIRECTORS			Registered Agent signature required 13.		d when reinstang) ADDITIONS/CHANGES TO OFFIC	DATE	
ITLE	PTS			TITLE		ABBITION OF OFFICE	Cha	ige Addition
iame Treet address	CASTANO, IVAN 4995 NW 79TH AVE SUITI	F 444	1.2	NAME		_ s.age _ Natility		ige El Madriton
ITY-ST-ZIP	MIAMI FL	E 114	1.3	STREE I	ADDRESS			
TLE	MILTON I F	[] DEL	ET.	CITY - S	I-ZIP			CTORS IN 12 Ige Addition
IAME		[] 600		TITLE NAME			☐ Char	ige 🔲 Addition
TREE1 ADDRESS					ADDRESS			
ITY-ST-ZIP				DITY-ST	1			
TLE		DEL		ITTLE			Char	ge 🔲 Addition
ame Treet address			321	IAME	1		L. J Sildi	a. Li wontion
ITY-SI-ZIP			3.3	STREET	ADDRESS			
ILE		DEU		11 Y - S1	-ZIP			ł
AME		اعا را					Chan	ge Addition
reet address			4.2 M		ADDRESS			
TY-ST-ZIP				ineel x ITY-ST				
TLE		[] DELE					☐ Chan	ge Addition
ME LEGGGGG			5.2 N	AME			First country	- Li vogition
REET ADDRESS			538	TREET A	ADDRESS			
IY-ST-ZIP LE		[] Por	T.	1Y-\$1	-ZIP			
ME	,	DELE					☐ Chang	e Addition
REET ADDRESS	4	1	62 N		DDDC00			
Y-\$T-ZIP	///	/ /n		IY-ST-	IDDRESS 719			
 I do hereby 	certify that the information supplied he information indicated by this an	with this thing y volunte	rily furnished and	does	not qualify for	r the exemption stated in Section 119.07	/avia Fig. 61	

certify that the information supplied with this filing fivoruntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated of 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 appears in Block 12 or Block 13 if yearned, and if an attackment with an address.

SIGNATURE:

A TO TO THE OR PLANTED HAME OF SIGNING OFFICER OR DIRECTOR

597-1105