## 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

## **FILED** Apr 09 1998 8:00am Secretary of State

	IMENT # P94000 O INTERNATIONAL, CORP.	0029229 (9)			T (TTIF INNA URNA NATA ARIA ARIA
Principal Place of Business Mailing Address					
8803 NW 23 STREET 7821 SW 95 ST				1	
MIAMI FL 33172 MIAMI FL 33156				55.167.1107.11	W0.004.65
US US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified		
				04/18/1994	
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26			65-0482163	Not Applicable
<del> </del> -		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27				G. Certificate of Status pesifed	Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Zip	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	F-1	30	<ol><li>This corporation owes or has paid the Personal Property Tax due June 30.</li></ol>	current year Intangible
	9. Name and Address of Current		[30]	10. Name and Address of New Registe	
PONS, MARTIN E 81 Name MARIN & PONS					
169 EAST FLAGLER STREET, STE. 1517				ress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33131			93	70 SUNSET DRIVE	A-100
, , , , , , , , , , , , , , , , , , , ,			83		
			84 City	11AM1	=L 85 Zip Code 33173
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab				poration submits this statement for the purpo-	se of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typed or printed rates of tegestered ages	et and the if anyleable. (NOTE	Fingistered Agent signature requir	red when reinstaling. DA	TE .
12.	OF LICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	☐ DELFTE	1.1 TITLE		Change Addition
NAME	RIPOLL, FRANCISCO		1.2 NAME		
STREET ADDRESS	1		1.3 STREET ADDRESS		Į.
CITY-ST-ZIP	MIAMI FL	[] briese	1.4 CITY-ST-ZIP		Channe   Addition
TITLE	PONS, MAIRAN	☐ DELETE	2.1 TITLE		Change Addition
NAME	The same Case Cold 140.	(A)100	2.2 NAME		
STREET ADDRESS CITY-ST-ZIP	MIBMI 1=6 331	73	2.3 STREET ADDRESS 2.4 CITY+ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME		_	3.2 NAME		_ , _
STREET ADDRESS	s <b>l</b>		3.3 STREET ADDRESS		[
CITY-ST-ZIP			3.4. CITY - ST- ZIP		i
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	; <b>[</b>		4.3 STREET ADDRESS		
CITY-ST-ZIP		T OF EXE	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME OTTOGET ADDRESS	.1		5.2 NAME		
STREET ADDRESS	`[		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	+	☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	; <del> </del>		6.3 STREET ADDRESS		
CITY-ST-ZIP	-		6.4 CITY-ST-ZIP		
	certify that the information supplied wi	In this filme does not qualify fo		Section 119.07(3)(i) Florida Statutes, Lifurthe	er certify that the information

indicated on this annual report or supplied with this ining cross not quality for the exemption stated in Section 119.07(3)(), Florida Statutes, I further certify that the informatic 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 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 12 or Block 13 if changed, or on an attachment with an address.

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