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. Corporatio	MENT # P94000 IATED ENGLISH INTERNAT	0037093 (9) TIONAL, INC.				
Principal Place of Business Mailing Address					r 1881/1881 gin initi midit ådtil bosti dakts bolan tilli santi datif fidiat tilli tant	
7000 SW 59TH PLACE MIAMI FL 33143 US		7000 S.W. 59TH PLACE Miami Fl 33143 US			DO NOT WRITE IN TH IS SPACE	
					3. Date Incorporated or Qualified	
2 Principal P	Place of Business	2a. Mailing Address			05/10/1994 4. FEI Number Applied For	
21		26			65-0489194 Not Applicat	ole i
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired S8.75 Additional	
22		27		·-·	Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
Zip	Country	Zip Country		atry.	Trust Fund Contribution Added to Fees	
24	25 COUNTY	29	30	ury .	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	9. Name and Address of Curre		1901		10. Name and Address of New Registered Agent	
SACHÉR, CHARLES P ESQ. 2655 LEJEUNE ROAD SUITE 1101 CORAL GABLES FL 33134				81 Name 82 Street Ad 83 City	idress (P.O. Box Number is Not Acceptable) FL 85 Zip Code	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NO	T£: Registered		orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered quirod when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12.	DI NOERS AN	ND DIRECTORS DELETE	13.	f	ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 12	nn
NAME	Be rkowitz, Robert	Z beerie	1.2 NAJ		L. Prongo L. Prongo	
STREET ADDRESS	TARREST TO THE TARRES			REET ADDRESS		
CITY-ST-ZIP	SOUTH MIAMI FL 33143			y-ST-ZIP		
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NAME	litsek, akos		2.2 NAI	ME .		
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NAME			3.2 NA	1		ł
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NAME			5.2 NA	ae		
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CITY-ST-ZIP		Theres		Y-ST-ZIP	1 A	
TITLE		☐ DELETE	61 111		Change Additi	on
NAME			6.2 NA			
STREET ADDRESS			4	EET ADDRESS		

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 nature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver en tusted 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.

CIONATURE.

R2E034 (10/97)

FILED

Sep 17 1998 8:00am

Secretary of State