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

CORPORATION ANNUAL REPORT

1998

MIAMI FL 33167

21

22

23

2. Principal Place of Business

Country

9. Name and Address of Current Registered Agent

if changed, or on an attactment with an addr

25

Suite, Apt. #, etc.

officer or director of Block 12 or Block 1

SIGNATURE:

City & State



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000061756 (0) DCH INTERNATIONAL, INC. Principal Place of Business Mailing Address 11151 NW 36TH AVENUE P.O. BOX 470338

MIAMI FL 33247

2a. Mailing Address

City & State

Ζip

Suite, Apt. #, etc

26

29

FILED Mar 10 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

X Yes

(305) 688-9199

8. This corporation owes or has paid the current year Intangible

Applied For Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ No

3. Date Incorporated or Qualified 08/22/1994

65-05 13933

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

FEI Number

LATCH, PAUL E 11151 NW 38TH AVENUE MIAMI FL 33167			Name Street Address (P.O. Box Number is Not Acceptable)					
		84	City		85	Zip Co	ode	\dashv
				<u>FL</u>				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE	Signature, typed or proted name of registered injurit and title if applicable (NOTE Register	ed Ane	n) erooshure	required when reinstating) DATE				— Ì.
12.	OFFICERS AND DIRECTORS 13.			ADDITIONS/CHANGES TO OFFICERS AND	DIREC	TORS	IN 12	
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NAME	LATCH, PAUL E	NAME						
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CITY-ST-ZIP		TY-S						
indicated	serify that the information supplied with this filing does not qualify for the ex- on this annual report or supplemental annual report is true and accurate ar- director of №0 Sepnoration or the receiver or trustee empoyered to execute	id tha	at my sign	nature shall have the same legal effect as if made und	er oath	; that	I am an	on

Country