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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P94000066389 (5) DOCUMENT #

١.	Corporation Name			•	•
	INTERNATIONAL	RRIGHT	CONNECTIONS	(LB.C.) INC.	



Principal Place of Business         Mailing Address           11720 NW 38TH PL SUNRISE FL 33323         11726 NW 38TH PL SUNRISE FL 33323											
							3. Date Incorporated or Qualified 09/06/1994	3a. Date	of Last F /15/19		
2. Principal Place of Business 21 Sulte, Apt. #, etc. 22			2a. Mailing Address 26				4. FEI Number 65-0614815			Applied For Not Applicable	
			Suite, Apt. #, etc				5. Certificate of Status Desired See Required Fee Required				
City & State 23	ity & State		City & State				6. Election Campaign Financing \$5.00 Ma Trust Fund Contribution Added to Fi				
Ζφ <b>24</b>	Country 25	29	Zφ	Cour	itry		8. This corporation has liability for Florida Statutes	intangible ta \[ \] No	x under s	199.032,	
	9. Name and Address	of Current Regist	ered Agent				10. Name and Address of New F	egistered .	Agent		
					81	Name					
CABREJO, DAVID G 11728 NW 38TH PL					82	Street Addre	ress (P.O. Box Number is Not Acceptable)				
SUNRISE FL 33323					83						
				Ì	84	City		FL	85 Z	p Code	
SIGNATURE	h, and accept the obligation		عامة لعب		Açarı ı	C EKIN DILINE MEGLIATEN	I when our stately  ADDITIONS/CHANGES TO OFF	DATE	DIRECTO	DRS INI 12	
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NAME	CABREJO, DAVID G			1.2 NA							
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR