FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00						_ FILED		
PROFIT CORPORATION			FLORIDA DEPARTMENT OF STATE			Feb 10 1998 8:00am		
ANNU	NUAL REPORT Secretary of Sta			ary of State				
	1998	Sa jer	DIVISION OF CORPORATIONS			Secretary of State		
DOCU 1. Corporatio	MENT # P94(	000079	9880 (8)					
	INTERNATIONAL, INC.							
Principal Place of Business         Mailing Address           12000 BISCAYNE BLVD.         12000 BISCAYNE BLVD.						A IOBUKADI KAK IDINK ALANI DANA DANA	UUII UUII IUDIU IUIU I	(OL OBADI BADI (DD)
SUITE 217 MIAM FL 33181			SUITE 217 MIAMI FL 33181			DO NOT WRITE IN THIS SPACE		
			WITE 55161			3. Date Incorporated or Qualifie	d	
	lace of Business	28. 1	Mailing Address			4. FEI Number		Applied For
21 Suite, Apt	#, etc	26	Suite, Apt. #, etc.			65-0639268	\$8.	Not Applicable 75 Additional
22 City & Stat	e	[27]	City & State			<ol> <li>6. Certificate of Status Desired</li> <li>6. Election Campaign Financing</li> </ol>	F	ee Required
23 Zip	Country	28]	<b>7</b> 1p	Coun	•m.	Trust Fund Contribution		Ided to Fees
24	25	29		30		8. This corporation owes or has Personal Property Tax due Ju	ne 30. 🔀 Yes	ar Intangible
KA	9. Name and Address of C HN, PATRICIA E ESO.	Current Registe	red Agent		81 Name	10. Name and Address of New	Registered Agent	· · · · · · · · · · · · · · · · · · ·
3326 MARY STREET					32 Street Add	Iress (P.O. Box Number is Not Accep	table)	
SUITE 202 MIAMI FL 33133					83			
				h	34 City	· · · · · · · · · · · · · · · · · · ·	FL 85	Zip Code
11. Pursuant office or r	to the provisions of Sections 60 ogistered agent, or both, in the	07.0502 and 607 State of Florida	7.1508, Horida State Such change was	ites, the abo	ve-named cor by the corpora	poration submits this statement for the	e purpose of change	ing its registered
agent I a SIGNATURE	m familiar with, and accept the	obligations of, 3	Section 607.0505, F	lorida Statu	tes	ition's board of directors. I hereby ac		
12.	Stonatore: typerf or printed name of much OLF ICEF	end agent and the du RS AND DIRE CT		ITE Registered	Agent signature requ	ADDITIONS/CHANGES TO OF	DATE	CTORS IN 12
TITLE		<u></u>	DELETE	1.1 TITL		• •	Chi	
NAME STREET ADDRESS	DONATELLI PINTO, AGIL 12000 BISCAYNE BLVD.			1.2 NAN 1.3 STR	eet address			
CITY-ST-ZIP TITLE	MIAMI FL 33181		DELETE	1.4 CITY 2.1 TITL	r - ST-ZIP		П с́ы	ange 🔲 Addition
NAME			berri.	2.2 NAM	1			
STREET ADDRESS CITY-ST-ZIP					EET ADDRESS Y - ST - ZIP			
THLE	·····		DELETE	2 4 CH 3.1 THL			Ch:	ange 🗌 Addition
NAME STREET ADDRESS				3 2 NAM 3.3 STR	IE EET ADDHESS			
CITY-ST-ZIP				3.4. CIT	Y-ST-ZIP			
TITLE NAME			L_) QELETE	4 1 TITL 4. 2 NA			L Chi	ange L_] Addition
STREET ADDRESS					EET ADDRESS			
CITY-ST-ZIP TITLE			DELETE	5.1 TITL	r-st-zip E		Chi	ange 🗌 Addition
NAME Street address				5.2 NAN				
CITY - ST - ZIP				5.4 CITY	EET ADDRESS - ST - ZIP			
title NAME			DELE1E	6.1 TITL 6.2 NAM			Cha	ange 🛄 Addition
STREET ADORESS		]			EET ADDRESS			
	certify that the information supp		ag des not qualify	to the exer	-ST-ZIP nption stated in	Section 119.07(3)(i), Florida Statutes	. I further certify that	at the information
	on this annual report or supple director of the corporation or th or Block 13 if changed, or on a	enental annual r	eport in true and ac	Jurate and	that my signatu	ure shall have the same legal effect a juired by Chapter 607, Florida Statute	s if made under oat	h; that Iam an
SIGNAT	. /	1X	1 K.F.			1/20/9	в	