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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

SHIBAO INTERNATIONAL, INC.

DOCUMENT # P94000089683

FILED Mar 22, 1999 8:00 am Secretary of State 03-22-1999 90092 006 ***150.00

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Principal Place	of Business	Mailing Address				6111 86161 1811\$ 19119 91	
370 CAMINO GA	ARDENS BLVD	P.O. BOX 811315					
SUITE 200C BOCA RATON FL 33481				TO HOT MURITE IN THE ORACE			
BOCA RATON F	FL 33432				DO NOT WRITE	IN THIS SPACE	
US	,				3. Date Incorporated or Qualifed		•
					12/09/1994	- i .	\
- ' - 4	ace of Business	2a. Mailing Address		;	4. FEI Number	. -	Applied For
21 2698	NW 395+.	26			65-0574069		Not Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.	تباحث		5. Certifcate of Status Desired		Additional Required
City & State	a Raton, FL 33434	City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip	Country	Zip	Cour	try	8. This corporation owes the current	year Intangible	
24	25	29	30		Personal Property Tax.	☐Yes	X No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Reg	istered Agent	
				81 Name	•		1
JOSI	low, Karl			82 Street Add	dress (P.O. Box Number is Not Acceptable		
2698	NW 39 STREET		1	Sileet Adi	dress (P.O. Box Number is Not Acceptable	••	j
BOC	A RATON FL 33434			83			
			-	O.A. City		85 Zi	p Code
				84 City		FL "L	oute 1
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	f Florida. Such change was aut	thorized	by the corporat	rporation submits this statement for the pution's board of directors. I hereby accept the	rpose of changing ne appointment as	its registered registered
SIGNATURE		·				DATE	
	Signature, typed or printed name of registered agent OFFICERS AND		13.	igent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE		TOPE IN 12
12.							
			_	_	ADDITIONS/CHANGES TO OFFICE		
TITLE	PD	DELETE	1.1 TIT	1	ADDITIONS/CHANGES TO SITTLE	Chang	
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CITY-ST-ZIP 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 approal 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 of rustee 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 any address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: