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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT # P94000091044 (5)

VERBI INTERNATIONAL CORP.

Principal Place of Business

Mailing Address

FILED May 01 1997 8:00am Secretary of State



941 NE 19TH AVE. 295 FT LAUDERDALE FL 33304		941 NE 18TH AVE. 295 FT LAUDERDALE FL 33304-3070				
				3. Date Incorporated or Qualified 12/16/1994	3a. Date of Last R 04/17/1996	eport
Principal Place of Business The Principal Place of Business The Principal Place of Business		2a. Mailing Address 26		4. FEI Number 65-0540339	Applied For Not Applicable	
Suito, Apt #, etc 22 SUITE 20上		Suite, Apt. #, etc. 27 ⊃∪17 € 201		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred	
City & Stat		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 Added 1	
Z(p 24	Country 25	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes		
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Re	glatered Agent	
	NTOS, MAURO C		81 Name			
	SE 2ND AVE, 1235 IMI FL 33131			Address (P.O. Box Number is Not Acceptab	le)	
			83			
	•		84 City		FL 85 Zip (
office or i	registe•ad agent, or both, in the St	0502 and 607.1508, Florida Statute ate of Florida. Such change was a oligations of, Section 607.0505, Flor	uthorized by the corp	corporation submits this statement for the population's board of directors. I hereby acceptions	urpose of changing it it the appointment as	s registered registered
SIGNATURE						
	Signer we typed or printed name of registered	agent and title if applicable. (NOTE	Registered Agent signature	required when reinstation	DAYE	
12.	OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	P	AND DIRECTORS DELETE	13. 1.1 TITLE		ERS AND DIRECTOR Change	S IN 12 Addition
TITLE NAMÉ	P VERBICARO, MARIA L		13. 1.1 TITLE 1.2 NAME			
TITLE NAME STREET ADDRESS	P VERBICARO, MARIA L 2455 NE 51ST ST E308		13. 1.1 TITLE			
TITLE NAME STREET ADDRESS CITY+S1-ZIP	P VERBICARO, MARIA L	☐ DELETE	13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE	P VERBICARO, MARIA L 2455 NE 51ST ST E308		19. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE			
TITLE NAME STREET ADDRESS CITY+S1-ZIP	P VERBICARO, MARIA L 2455 NE 51ST ST E308	☐ DELETE	13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE	P VERBICARO, MARIA L 2455 NE 51ST ST E308	☐ DELETE	19. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change	Addition
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THE NAME STREET ADDRESS CITY-SI-ZIP THE NAME STREET ADDRESS CITY-SI-ZIP THEF NAME STREET ADDRESS CITY-SI-ZIP	P VERBICARO, MARIA L 2455 NE 51ST ST E308	DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		☐ Change	Addition Addition
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Information indicated on this annual report or supplemental annual report is true 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 13 if changed, or on an attachment with an address.

SIGNATURE: