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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P94000091680 (6)

INTERNATIONAL DUADAMED INC

rincipal Place of Business	Mailing Address
7751 SW 26TH STREET	7751 SW 26TH STREET
MIAMI FL 33155	MIAMI FL 33155

FILED Mar 13 1998 8:00am Secretary of State

	INTIONAL PHANTHEO, IN							
Principal Place	e of Business	Mailing Address				111 66 116 16118 1811		II) 28 11 1 83 1
7751 SW 26TI		7751 SW 26TH STREE	ET					
MIAMI FL 33155 MIAMI FL 33155					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualif			
					12/20/1994			
2. Principal Pl	lace of Business	2a, Mailing Address			4. FEI Number		Ar	oplied For
1		26]			65-0555573			ot Applicable
Suite, Apt.	#, etc	Suite, Apt #, etc.			5. Certificate of Status Desired	ı 🗆		Additional equired
City & State	9	City & State	·		8. Election Campaign Financin	10	\$5.00	May Re
3		28			Trust Fund Contribution			to Fees _
Zip	Country	Zφ	Count	ry	8. This corporation owes or ha	s paid the cu		
4	25	29	30		Personal Property Tax due			No
	g. Name and Address of Cu	rrent Registered Agent		4	10. Name and Address of Nev	v Registered	Agent	
	TIZ, NANCY		8	1 Name				
	SI SW 26TH STREET		8	2 Street Add	dress (P.O. Box Number is Not Acce	ptable)		
MIA	MI FL 33155		8	.				
			6	1				
			8	4 City		FL	85 Zip	Code
dd Digwood I	to the are lain and Posters 607	DEDO and CO7 1609 Darido Cra	at the she	La pamad car	poretion submits this statement for t		l obanaina it	te rogintoros
office or re	egistered agent, or both, in the S	state of Horida, Such change wa	as authorized l	by the corpora	poration submits this statement for talion's board of directors. I hereby a	ccept the app	ointment as	registered
agent. I ar	m familiar with, and accept the of	bligations of, Section 607.0505,	, Florida Statuti	es.				
SIGNATURE.	Standard travel or neutral turne of marting	d Aures and their applicable	NOTE Registered A		lited when re/fislating)	DATE		
	Signature, typed or printed himse of registers OF FIGURS	diagnoria of blent applicable (I			ired when reinstating) ADDITIONS/CHANGES TO O	DATE DEFICERS AND	DIRECTOR	RS IN 12
12.			NOTE Registered A 13. 1.1 TITLE	geni signature requ	ofred when reinstating) ADDITIONS/CHANGES TO C		DIRECTOR Change	
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port or supplicinental action report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an exporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in inged, or on an altochmonolywith an address

SIGNATURE: