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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000093219 (1)

INTERNATIONAL TRADE & TOURISM NETWORK INC.

Principal Place of Business

Mailing Address

FILED Apr 08 1997 8:00am Secretary of State



4229 N. TAMIAMI THAIL SARASOTA FL 34234			4229 N. TAMIAMI THAIL SARASOTA FL 34234-3859					
						3. Date Incorporated or Qualified 01/01/1995	3a. Date of Last 6 04/12/1996	Report
2. Principal F	lace of Business	2a. Mailing Ad	2s. Mailing Address			4. FEI Number		pplied For
21		26	26			65-0542538	65-0542538 Not Applicable	
Suite Apt #, etc		Suite, Apt	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$8. 7 5	Additional
22		27				Fee Required		
City & State	e	City & Sta	te			6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution	☐ Added	to Fees
Ζ φ	Country	Zip	*******	Country		8. This corporation has liability for intengible tax under s. 199.032,		
24	[25]]29]	30				Yes No	
	9. Name and Address of (Current Hegistered Ager)I	81 N	lame	10. Name and Address of New Reg	pletered Agent	
	enyi, zoltan			"	arne			
4229 N. TAMIAMI TRAIL				82 S	treet Addr	et Address (P.O. Box Number is Not Acceptable)		
SAR	ASOTA FL 34234							
				83		•		
				84 C	itv		85 Zip	Code
					<i>'</i>		FL	
11. Pursuant i office or re agent. La	to the provisions of Sections 60 egistered agent or both, in the m familiar with, and accept the	07.0502 and 607.1508, File State of Florida. Such che obligations of, Section 6	orida Statutes, the a lange was authorize 07.0505, Florida Sta	above-na ed by the atutes.	amed corp e corporat	coration submits this statement for the pi cion's board of directors. I hereby accep	urpose of changing t the appointment as	its registered registered
SIGNATURE								
	Signature, typed or printed name of regist			ad Agent si	gnature requir	red when reinstating)	DATE	
12.	P	RS AND DIRECTORS	13. DELETE 1.1.T	· · · ·		ADDITIONS/CHANGES TO OFFIC		
TITLE	•						[] Change	Addition 3
NAME	DEVENYI, ZOLTAN			IAME				
STREET ADDRESS	4229 N TAMIAMI TRAIL		1.3 8	STREET ADD	RESS			[]
CITY-ST-7IP	SARASOTA FL			CITY-ST-ZI	P			}
TITLE	S DELEGANA DEDIMO		DELETE 2.1 T				L. Change	Addition C
NAME	DEVENYI, HEDWIG		2.2 M	IAME	į			
STREET ADDRESS	4229 N TAMIAMI TRAIL		2.3 8	STREET ADD	ress			
CDY-S1-ZIP	SARASOTA FL			CITY - ST - Z	IP .			
TITLE			DELETE 3.11	TITLE			☐ Change	Addition
NAME			3.21	IAME				
STREET ADDRESS			3.3 9	STREET ADD	AESS			
City - ST - ZIP	The separate of the second	2 TT S S S S S S S S S S S S S S S S S S		C(TY-\$1-Z	P L			
THILE			DELETE 4.1 T	ITLE			Change	Addition
NAME.			4.21	NAME				1
STHEET ADDRESS			4.3 \$	STREET ADD	RESS			
CHY-ST-7IP				HTY-ST-ZI	P			
TITLE			DELETE 5.1 T	ITLE			Change	Addition
NAME			5.2 M	IAME		4		
STREET ADDRESS			5.3 9	STREET ADD	AESS			
DITY-ST-7IP				OTY-ST-ZI				
TITLE			DELETE 6.1 T				Change	Addition
N4Mf				IAME			-	
STREET ADDRESS				STREET ADD	HESS			
City-St-7IP			■ 641	HTY-\$1-Z	<u>r </u>			

14. I do 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 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.

April 2, 1997

941/351-7578

Daytime Phone #