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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400093219 (1)

INTERNATIONAL TRADE & TOURISM NETWORK INC.

| Principal Place of Business |
|--|
| 4229 N. TAMIAMI TRAIL SARASOTA FL 34234 |

SIGNATURE:

Mailing Address

4229 N. TAMIAMI TRAIL SARASOTA FL 34234

FILED May 01 1998 8:00am Secretary of State



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|--|--|--|--|---|---------------------|--------------------|------------|-------------------------|----------------------|---|-----------------------------|-----------------------|-----------------------------|-------------------------------|----------|
| | | | | | | | | | Ì | 3. Date Incorporated or Q | ualified | | | | \Box |
| 2. | Principal Pla | ace of Busin | ness | 2a. Mailing A | 2a. Mailing Address | | | | | 01/01/1995 4. FEI Number | | | $\neg \neg \neg$ | Applied For | \dashv |
| 21 | | | | 26 | } | | | | Ì | 65-0542538 | | | | Not Applicat | ole |
| | Suite, Apt. (| , etc. | | | Suite, Apt. #, etc. | | | | $\neg \neg \uparrow$ | | | _ | | Additional | |
| 22 | | | | 27 | 27 | | | | | 5. Certificate of Status Des | sired | | | Required | |
| _ | City & State | , | | City & St | City & State | | | | | 6. Election Campaign Fina | ncing | | \$5.0 | May Be | |
| 23 | | | | | | | | | | Trust Fund Contribution | | <u> </u> | Adde | d to Fees | |
| _ | Zip | Country | | | | l Cou | intry | | | 8. This corporation owes of | | | | | 4 |
| 24 | | A Name | 25 Address of Curr | 29 | mi | 30 | | | | Personal Property Tax of 10. Name and Address of | | | Yes | □ No | |
| 9. Name and Address of Current Registered Agent DEVENYI, ZOLTAN 81 | | | | | | | | Name | | TO, MARINE BING MODITES OF | Now nogi | Stereu P | riberu. | | ᅱ |
| | | | | | | | | | | | | | · | | |
| | | | AMI TRAIL | | | | 82 | Street | Addres | s (P.O. Box Number is Not A | cceptable |)) | | | - 1 |
| | 5AP | rasota f | L 34234 | | | į | 83 | | | | | | | | |
| | | | | | | | | | | | | | | | _] |
| | | | | | | | 84 | City | | | | FL | 85 Zi | p Code | ſ |
| 11 | . Pursuant k | o the provis | ions of Sections 607.0 | 502 and 607,1508, F | lorida Statut | es, the at | 00/6 | -named | corpor | ation submits this statement | for the pu | rpose of | changing | its registere | a |
| 11. Pursuant to the provisions of Socions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Soction 607.0505, Florida Statutes. | | | | | | | | | | | | | | | |
| ۸. | - | i ia i i i i i i i i i i i i i i i i i | itit, Brid accept the ob- | gatoris or, occitori | JOT.0303, FIL | JIJOB SIBI | uics | • | | | | | | | - 1 |
| SI | GNATURE ; | Signature, typed | or printed name of registered a | igent and title if applicable | (NOT | E Registered | d Age | ni signature | berluper : | when reinstating) | | DATE | · ·- | | - _ |
| 12 | | | OFFICERS A | NO DIRECTORS | | 13. | | | | ADDITIONS/CHANGES T | O OFFICE | RS AND | DIRECTO | ORS IN 12 | |
| 717 | LE | P | | | DELETE | ELETE 1.1 TIT | | | | | | | Change | e 🔲 Additi | on E |
| NAJ | ME | DEVEN | /I, ZOLTAN | | | 1.2 NA | WE | | | | | | | | 2 |
| STR | REET ADDRESS | 4229 N | Tamiami Trail | | | 1.3 \$1 | REET. | ADDRESS | | | | | | | 18 |
| CIT | Y-ST-ZIP | SARAS | OTA FL | | | 1.4 CiTY- | | T-ZIP | | | | | | | 8 |
| TIT | LE | \$ | | L | DELETE | 2.1 Til | ILE | Į | | | | | Changi | e 🔲 Additio | ou Ic |
| NA | ME | | /I, HEDWIG | | | 2.2 NAME | | | 1 | | | | | | |
| | EET ADDRESS | | TAMIAMI TRAIL | | | 2.3 STREE | | ADDRESS | | | | | | | l |
| _ | Y-ST-ZIP | SARAS | DTA FL | | Lociette | 2.40 | | T-ZIP | ļ | | | | Chann | . Addist | |
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| , NAJ | | | | 3.2 N | | | | | | | | | | | |
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| NAA | | | | | | 5.2 NA | | ľ | ! | | | · | • | =::: | |
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| STR | EET ADDRESS | | | | | 6.3 \$1 | REET A | ADDRESS | | | | | | | . |
| | Y-ST-ZIP | _ | | | | 6.4 ÇI | | | | | | | | | - } |
| 14. | I hereby co | ertify that the on this annu- linector of th | e information supplied al report or supplement the corporation of the re | with this filing does ital annual report is to ceiver or trustee em | not qualify for | or the execute to | mpt tha | ion state it my sigi | id in Se nature : | ction 119.07(3)(i), Florida St shall have the same legal eff ed by Chapter 607, Florida S | atutes. I fu ect as if m | rther cer nade und | tify that ti ler oath; i | he informatio that I am an | n |
| | officer or director of the corporation of 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. | | | | | | | | | | | | | | |