

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

FILED
Jun 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P 95000010959 (1)
1. Corporation Name
NEW WAY INTERNATIONAL SERVICES, INC.

Principal Place of Business 8345 nw 66 st MIAMI-FL 33166	Mailing Address 8345 nw 66 st MIAMI-FL 33166
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 02/06/1995	4. FEI Number 65-0558155 Applied For Not Applicable	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No
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9. Name and Address of Current Registered Agent MONJE, HECTOR A 8345 NW 66 St MIAMI FL 33166	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 607.01-02 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 provisions of, Section 607.0505, Florida Statutes.

SIGNATURE Signature of the person who is authorized to sign this statement (If the Florida Secretary is required when registering)		DATE	
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100		14. I hereby certify that the information supplied was true and correct, and that I am qualified to execute the statement in Section 119.07(3)(i), Florida Statutes. Further, I certify that the information indicated on this annual report or supporting documents is true and correct, and that my signature shall have the same legal effect as I made under oath, that I am an officer or director of the corporation, or the registered agent, and that the information supplied was required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 of this report or supporting documents.	

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)