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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90078 036 ***150.00

1. Corporation	MENT # P95000 TERNATIONAL CORP.	017859							
Principal Place	e of Business	Mailing Address	-						SILLE ION LOUI
7245 S.W. 158TH AVENUE 7245 S.W. 158TH AVENUE									
MIAMI FL 33193 MIAMI FL 33193									
						DO NOT WRI	TE IN THIS	SPACE	
						3. Date Incorporated or Qualifed			
	-					03/03/1995 4. FEI Number		1 0	plied For
	ace of Business	2a. Mailing Addre	rss			65-0569786		<u> </u>	t Applicable
Suite Ant	#, etc	26 Suite, Apt. #,			 -			\$8.75	
22	m, 600.	27		•	-	5. Certificate of Status Desired		Fee Re	
City & State	9 ·	City & State			_	6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees			
Zip	Country	Zip Country				8. This corporation owes the curr	ent year Inta	ingible	_
24	25	29	30			Personal Property Tax.		☐ Yes	□No
	9. Name and Address of Current	Registered Agent		941		10. Name and Address of New I	Registered /	Agent	
MERCADO, FREDDY 7245 S.W. 158TH AVENUE				81 Nar 82 Stre		ss (P.O. Box Number is Not Accepta	able)		
MIAMI FL 33193				83			_		
	•	\$		84 City				85 Zip (Code
		3					FL		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register 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, Section 607.0505, Florida Statutes. SIGNATURE Signature, board or printed name of registered apent and site if applicable. (NOTE: Registered Agent signature required when reinstating)									registered gistered
40	Signature, typed or printed name of registered agen OFFICERS AN		(NOTE: Registere		ure required	ADDITIONS/CHANGES TO OF	_	D DIRECTO	RS IN 12
12.	P	□ DE		TITLE		ABBITIONS IN MICE VO OF	102/10/11	Change	☐ Addition
NAME	MERCADO, FREDDY	_	-	NAME					
STREET ADDRESS	7245 S.W. 158TH AVENUE		1.35	STREET ADORI	ss				
CITY-\$T-ZIP	MIAMI FL 33193			CITY-ST-ZIP					}
TITLE		□ DE		TITLE				Change	☐ Addition
NAME			2.21	NAME					
STREET ADDRESS			2.3	STREET ADDRI	SS				
CITY-ST-ZIP 1		-	2.4	CITY-ST-ZIP		··			
TITLE		☐ DE	LETE 3.1	TITLE				Change	☐ Addition
NAME			3.21	NAME		•			
STREET ADORESS			3.3	STREET ADDRE	SS				}
CITY-ST-ZIP	·		3.4.	CITY-ST-ZIP			_		
TITLE		□ DE	LETE 4.1	TITLE				Change	☐ Addition
NAME			4.2	NAME	ļ				-
STREET ADDRESS	• •		4.3	STREET ADDR	SS				}
CITY-ST-ZIP				CITY-ST-ZIP				(T) (A)	
TITLE (☐ DE		TITLE				Change	☐ Addition
NAME				NAME				•	
STREET ADDRESS	· 		· .	STREET ADDRI	:55				
CITY-ST-ZIP				CITY-ST-ZIP	. -		_	Change	Addition
TITLE		□ DE						☐ Change	
NAME				NAME					1
STREET ADDRESS			6.3	STREET ADDR	:00				

14. 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP