## 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 # P95000021859 (0)

ARCH INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

## FILED Jun 04 1997 8:00am Secretary of State



4795 NW 1047 MIAMI FL 3317		4795 NW 104TH AVE MIAMI FL 33178-2271					
					3. Date Incorporated or Qualified 03/17/1995	3n. Date of Las 08/08/199	
2. Principal Place of Business, 2a. Mailing Address 26 9810 NW 43 TERK 26 9810 NW 43				<b></b>	4. FEI Number		Applied For
	NW 43 TERR		45	1EKK.	NOT APPLICABLE		Not Applicable
Suite, Apt. #, etc.         Suite, Apt. #, etc.           22         27					5. Certificate of Status Desired	1 1	5 Additional Required
	MIAMI, FLORIDA 28 MIAMI, FLOR				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 3317		11	30 Cour	プS.A.		] Yes 🔲 No	er s. 199.032,
400	9, Name and Address of Current	Hegistered Agent		81 Name	10. Name and Address of New Reg	gistered Agent	
2121 PONDE DE LEON BLVD, 721 CORAL GABLES FL 33134				VI Maine			
				82 Stroot Address (P.O. Box Number is Not Acceptable)			
				83			
			L	<u> </u>			
			1	B4 City		FL  85   Z	ip Code
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was a	uthorized	by the corpora	poration submits this statement for the pation's board of directors. I hereby accep	urpose of changin	g its registered as registered
SIGNATURE	•	,					
	Signature, typed or printed name of registered agen			Agent signature requ	ired when reinstating)	DATE	
12.	, OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	D Hayashida, Sandra	☐ DELETE	1.1 7(1)	·		Chan	ge [_] Addition
NAME STREET LIBORESE	4795 NW 104TH AVE		1.2 NAM				
STREET ADORESS CITY-ST-ZIP	MIAMI FL 33178			EET ADORESS			
TITLE	MEMILIE GOTTO	DELETE	21 IIIL	Y-ST-7IP		Chang	ge Addition
NAME			22 NA				,,,
STREET ADDRESS				EFT ADDRESS			
CITY-ST-ZIP			1	Y-ST-ZIP			
TITLE		☐ DELETE	3.1 7(1)			☐ Chan	ge Addition
NAME			3.2 NAM	AE .			
STREET ADDRESS	li de la companya de		3.3 STR	EET ADDRESS			
CITY-ST-ZIP			3.4. CIT	Y-S1-ZIP			
TITLE		☐ DELETE	4.1 1116	.E		Chang	ge 🔲 Addition
NAME			4 2 NA	ME			
STREET ADDRESS			4.3 STR	FET ADDRESS			
CITY-ST-ZIP		Decem		Y-S1-ZIP			
TITLE		☐ DELETE	5.1 111	· I		[] Chang	ge 🔲 Addition
NAME			5.2 NAN				
STREET ADDRESS				EE1 ADORESS			
CITY-ST-ZIP	<del></del>	DELETE	5.4 CIT	Y-ST-ZIP		Chan	ge Addition
NAME		otten	6.2 NAM	į		L_J Gliani	yo Laad Addition
STREET ADDRESS				EET ADDRESS	•		
				- 1			
CITY-ST-ZIP			6.4 UT	Y-ST-ZIP			

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 suppliemental annual report is frue 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.

4/25/97 (305)/0637