## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1006

	1996	DIVISION OF C	ORPOBATIONS		
1. Corporation	Name	00032622 (9)			
UNITE	D SALES INTERNATIONAL	L, CORP.		A TRANSTRA AND TRANS BOARD BOARD BOARD BOARD BO	DIA MAINO NIGO ALBON DIALO NADIO ALGO ALGO NODI
Principal Place of Business		Mailing Address		1 10011261 110 10101 01111 06111 00111 00	DISE MASAM 1444 SIALA BESTA ETANE TENE INDO
12941 SW 47TH TER MIAMI FL 33175		12841 SW 47TH TER Miami Fl 33175			
Merchan / E oc		MINMI FL 33173		Date Incorporated or Qualified	3a. Date of Last Report
				04/26/1995	sa. Date of cast neport
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0575730	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		63-03/3/30	Not Applicable
22	F, 610.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
<b>23</b> Zip	Country	28	Country	Hust Fund Contribution	Added to Fees
24	25	Zip [29]	Country 30	This corporation has liability for inta     Flonda Statutes      West [	5
	9. Name and Address of Curre			10. Name and Address of New Reg	Istered Agent
			81 Name	MANUEL G. MESA M	18A
THE LAW FIRM OF LAWRENCE J. SPIEGEL 82 Street Addr			Address (P.O. Box Number is Not Acceptable)		
1	GABLES FL 33134		83 95	100 1100 2011: 21. 3.	<u> </u>
			84 Oty		<b>85</b> Zio Code
44 Dun sal h	a the annihilate of Carlinea CO7 OF	20 and 607 1500 Physics Control	'M	iAmi	FL     <i>33/72</i>
<ul> <li>or registere</li> </ul>	ed agent, or <b>both,</b> in the State of Fic	orda. Such change was authorized	, the above-hamed co Lby the corporation's t	rporation submits this statement for the purpo board of orectors. I hereby accept the appoint	ise of changing its registered office timent as registered agent. I am
SIGNATURE	h, and accept the obligations of the	West Statutes.		2	15/96.
	Signature, typied or printed name of remaining		Helpstered Agest Suprature to	clarified while the tradition of	DATE
12.	P P PICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
NAME	RAMIREZ, LEONARDO	<b></b>	1.2 NAME		C change C Mackan
STREET ADDRESS	12841 SW 47TH TER		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33175		1.4 CITY - ST - ZIP		
TITLE		☐ DETEAL	2 1 Tille	S/T	Change Addition
NAME			2 2 NAME	ISABEL BATISTA 12841 SW 47TH TEXA HIAMI, FL. 33175	<b>C</b> .
STREET ADDRESS			2.3 STREET ADDRESS	12841 50 4111 12	
CITY-ST-ZIP TITLE		DELETE	2.4 CiTy - ST - ZIP 3.1 TiTLE	MIAMI, FC, 33113	Change Addition
NAME		octor	3 2 NAME		Change Addition
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY+ST_ZIP		
TITLE		☐ DELETE	4 1 TIFLE		Change Addition
NAME			4.2 NAME		,
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP	Hara Mariana	
TITLE		DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			5.2 NAME		
CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		
THILE		☐ DELETE	6 1 Tilit		Change Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
			_		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 by the corporation of the executer outrusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if pranged, or on a pattaching of with the address.

SIGNATURE:

SIGNAJURE AND TYPED OR PRINTED NAME O SIGNING OFFICER OR DIRECTOR

805-225-75760 Dayline Phone V