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Jun 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000032746

1. Corporation Name

INTERNATIONAL REX INC.

Principal Place of Business

Mailing Address

2. Principal Place of Business	2a. Mailing Address
21 2500 Hollywood Blvd.	26 2500 Hollywood Blvd.
Suite, Apt. #, etc	Suite, Apt. #, etc
22 Suite #212	27 Suite #212
City & State	City & State
23 Hollywood, Fl.	28 Hollywood, Fl.
Zip	Zip
24 33020	29 33020
Country	Country
25 Broward	30 Broward

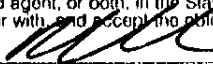
3. Date Incorporated or Qualified	3a. Date of Last Report
4/26/1995	4/30/1996
4. FEI Number	Applied For
59 3557774	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
☐	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
☐	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name	ROSS H. MANELLA ESQ.		
82 Street Address (P.O. Box Number is Not Acceptable)	2500 Hollywood Blvd.		
83	Suite #212		
84 City	Hollywood,	FL	85 Zip Code 33020

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 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, Section 607.0505, Florida Statutes.

SIGNATURE:  ROSS H. MANELLA 4/20/97

Signature typed or printed name of registered agent and title if applicable

(R03) Registered Agent Signature required when reappointing

DA

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Pstd ☐ DELETE	11 TITLE	☐ Change ☐ Addition
NAME	Joel Gillet	12 NAME	
STREET ADDRESS	66 Rue Des Tourvettes	13 STREET ADDRESS	
CITY-ST-ZIP	74160 Bossex, France	14 CITY-ST-ZIP	
TITLE	vp ☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME	Monica D'Achon Jaubert	22 NAME	
STREET ADDRESS	66 Rue des Tourvettes	23 STREET ADDRESS	
CITY-ST-ZIP	74160 Bossex, France	24 CITY-ST-ZIP	
TITLE	☐ DELETE	31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	☐ DELETE	41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97

Date

Printed Name

CR2E034 (9/96)