

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

FILED  
May 12 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000032770 (6)  
1. Corporation Name  
FLORIDA INTERNATIONAL SLS, INC.



Principal Place of Business: 3873 48TH AVENUE SOUTH, ST. PETERSBURG FL 33711  
Mailing Address: 3873 48TH AVENUE SOUTH, ST. PETERSBURG FL 33711

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 2219 Pasadena Place South, Suite, Apt. #, etc. City & State: Gulfport, FL, Zip: 33707, Country: Pinellas  
2a. Mailing Address: 26 2219 Pasadena Place South, Suite, Apt. #, etc. City & State: Gulfport, FL, Zip: 33707, Country: Pinellas

3. Date Incorporated or Qualified: 04/24/1995  
4. FEI Number: 59-3310577  
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

9. Name and Address of Current Registered Agent: SEGUNDO, SARA ARDILA, 3873 48TH AVE S, ST. PETERSBURG FL 33711

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable): 2219 Pasadena Place South, 83, 84 City: Gulfport, FL, 85 Zip Code: 33707

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: Sara Ardila Segundo, Director, 27 APR 98

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	SEGUNDO, SARA ARDILA	
STREET ADDRESS	3873 48TH AVENUE SOUTH	
CITY-ST-ZIP	ST. PETERSBURG FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SEGUNDO, ERNEST C JR.	
STREET ADDRESS	3873 48TH AVENUE SOUTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33711	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	2219 Pasadena Place South
1.4 CITY-ST-ZIP	Gulfport, FL 33707
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	2219 Pasadena Place South
2.4 CITY-ST-ZIP	Gulfport, FL 33707
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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: Sara Ardila Segundo, 27 APR 98 (813)343-8396

CR2E034 (10/97)