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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

DOCUMENT # P95000042985 (8)

MVR INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

FILED Apr 16 1997 8:00am Secretary of State



8400 N UNIVERSITY DR SUITE 207 TAMARAC FL 33321		8400 N UNIVERSITY OR SUITE 207 TAMARAC FL 33321-1700					
					3. Date Incorporated or Qualified 06/02/1995	3a. Date of Last 6 05/01/1996	Report
2. Principal Place of Business 26. Mailing Address					4. FEI Number	<u> </u>	pplied For
21 7580 SOUTHGATE BLVD 26 Suite, Apt. #, etc.					65-0586292	·····	ot Applicable
22 SUITE # 33 27				· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	Fee R	Additional equired
City & State City & State City & State City & State City & State					Election Campaign Financing Trust Fund Contribution		May Be to Fees
2p733	○ 68 Country	Zip Country 30			This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
KHALLOUQI, MIKKI				81 Name			
8400 N UNIVERSITY DR SUITE 207 TAMARAC FL 33321				Street Add	iress (P.O. Box Number is Not Acceptable	e)	
			83	}			
			84	1 ' '	·	FL '	Code
11. Pursuant I	to the provisions of Sections 607.0502	and 607,1508, Florida Statut f Florida, Such change was a	es, the above	e-named cor	poration submits this statement for the pation's board of directors. I hereby accep	urpose of changing	its registered registered
agent. La	m familiar with, and accept the obligati	ons of, Section 607.0505, Fig.	orida Statute	is.	,	O 1 0'	
SIGNATURE	Signature Typed or privided name of registered agent.	and to a it applicable NOT	F: Ronistered Ar	ent signature requi	ired when reinstating)	<u>04-11-4</u>	
12.	OFFICERS AND		13.	ant angriatore redo	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	RS IN 12
TOLE	PTD	DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	KHALLOUQI, MIKKI		1.2 NAME				
STREET ADORESS	8332 S CORAL CIRCLE		1.3 STREE	T ADDRESS			
C(1Y-S1-7)F	NO LAUDERDALE FL 33068	T burn	1.4 CITY -	ST-ZIP		[[[[[[[[[[[[[[[[[[[[Addition
ŢIŢĮ.{	vsd Khallouqi, vera	DELETE 2.1 T				Change	Addition
NAME STREET ADORESS	8332 S CORAL CIRCLE			T ADDRESS			
CITY-ST-ZIF	A LAUDEDDALF EL ANGO		2.3 STREE				
TITLE			3.1 TITLE	<u> </u>		Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			-
CBY-SI-ZIF			3.4. CITY	ST-ZIP		·····	
TOLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAM				
STREET ADDRESS				T ADDRESS			
CHY+ST-20P		DELETE	4.4 CITY - 5.1 TITLE	ST-ZIP		Change	Addition
TITLE NAME		□ ptrest	5.1 NAME			· Lui Diranga	. Addition
STREET ADDRESS				T ADDRESS			
COY-S1-20			5.4 CITY-				
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY- ST- ZIP			6.4 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: