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

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

P95000043606 (9)

ALLTECH EXPO BUSINESS CORP.

Principal Place of Business Mailing Address						- I HOOMHOU HIN FOIGH BIRMF BOOM DOUL BOURE REGAL	APARA (INIO ENKI ORKIR DIII KORI
831 N.E. 206TH ST. NORTH MIAMI BEACH FL 33179		831 N.E. 206TH ST. NORTH MIAMI BEACH FL 33179					
						06/06/1995	te of Last Report
_2, Principal Plac 21	ce of Business	2a. Mailing Address				4. FEI Number 65-058 5406	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	\$ audinos.				\$8.75 Additional
22		27	· · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired	Fee Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
-τι Ζιρ	Country	Zip	Cou	ntry		8. This corporation has liability for intangible	
24	25	29	30			Florida Statutes Yes No	
	9. Name and Address of Currer	nt Registered Agent	 -	81	Nome	10. Name and Address of New Registered	Agent
0050	NDDC1						
GOES, A	INDREA 206TH ST.			82	Street Addres	ss (P.O. Box Number is Not Acceptable)	
	MIAMI BEACH FL 33179			83			
				84	City	FI	85 Zip Code
11. Pursuani to	the provisions of Sections 607.0502	2 and 607.1508, Florida Statu	tes, the abo	ve-r	named corporal	tion submits this statement for the nurnose of of	nanging its registered office
or registere familiär with	d agent, or both, in the State of Flori i, and accept the obligations of, Sec	ida. Such change was authori: Ion 607.0505, Florida Statute	zed by the o s.	corp	oration's board	of directors. I hereby accept the appointment a	s,registered agent. I am
SIGNATURE _	1 de la					02/5/	96
	lgual re typed or per ted har of registered agen			Agen	nt signiature required v		
12. THE		ID DIRECTORS	13.	12.6		ADDITIONS/CHANGES TO OFFICERS AN	☐ Change ☐ Addition
NAME	PD OCC ANDREA	C) ptriit	1. 1 TITL 1.2 NAM				Criange Admition
STREET ADDRESS	GOES, ANDREA % 831 N.E. 206TH ST.				ADDRESS		
C-11-S1-7 P							
Tille	N MIAMI BEACH F; 33179 . SD	□ DELETE	2 1 T		T-ZIP		Change Addition
NAME	STELLA, AYRTON		2.2 NAM				
STREET ADDRESS	% 831 N.E. 206TH ST.				ADDRESS		
CHY SI-ZIP	N MIAMI BEACH F; 33179				71-71P		
TITLE	14 WINNII DEACH F. 23118	[] DELETE	3 1 I		1-24		Change Addition
NAME .			3 2 N			. •	
STREET ADDRESS					F ADDRESS		
CiTY+S1+ZiP					ST-ZIP		
TIFLE		DELETE	4 1 1				☐ Change ☐ Addition
KAM:			42 N	AME			
STREET ADDRESS			43 S	REET	ADDRESS		j
CHY-ST-ZIP			4 4 C	TY-S	6T - ZIP		
TIBLE		[] DELETE	5 i T				Change Addition
NAML			5 2 N	AME			
STREET ADDRESS			538	HEET	ADDRESS		
CHY ST ZIP			540	TY-S	ST - ZIP		
TITLE		DELFIE	6 1 1	ΙĻΕ	1		☐ Change ☐ Addition
NAME			6.2 N	AME			
STREET ADDRESS			6351	REET	ADDRESS		
Cily-S1-ZIF			6 4 C	TY-S	ST - ZIP		

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under outs, that I am an officer or director of the comporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapped, or on an attachment with an address.

SIGNATURE: V

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/3/96

305-770-6083

Daytime Phone it