## 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 # P95000059691 (2)

S.L. INTERNATIONAL, INC.

Principal Place of Business 741 N.W. 39TH AVE

Mailing Address

741 N.W. 39TH AVE.

## **FILED** Jan 29 1997 8:00am Secretary of State



FT. LAUDERO	ALE FL 33311		FT. LAUDERDA	FT. LAUDERDALE FL 33311-6337									
							3.				te of Last Report 26/1996		
2. Principal Place of Business			2a. Mailing Ad	2a. Mailing Address				FEI Number	······································		L	Apr	lied For
21			26	***   ***				65-059913	)			Not	Applicable
Suite, Apt. #, etc.			27				5.	. Certificate of Sta	ate of Status Desired Fee Required				
City & State				City & State			6.	6. Election Campaign Financing \$5.00 May Be					
<b>23</b> Zip	<u>1</u>	Country	28		Countr		,	Trust Fund Cont					Fees
24	2	·n	Zip 29	<u> </u>		/	8.	<ul> <li>This corporation Florida Statutes</li> </ul>			tax und ] No	ler s.	199.032,
24]			29   rent Registered Ager		30	** ** **	10	). Name and Add			···		
LEI	NNOX, SAMU	****			81	Name		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		<b>3</b>			·*·· · · · · ·
	N.W. 39TH				-	0	A -1-1 7	/0.0 b. N					
	LAUDERDAL				82		Address (	(P.O. Box Number	is Not Acceptat	) 			
ı					83								
ı					84	City			····	FL	85	Zip C	ode
11. Pursuani office or agent 1	t to the provisio registered agei am familiar with	ns of Sections 607.0 nt, or both, in the Sta i, and accept the obl	502 and 607.1508, Fl ate of Florida Such ch ligations of, Section 60	orida Statute lange was al 07.0505, Floi	s, the above uthorized b rida Statute	e-name y the co s.	d corporation's	ion submits this sta board of directors	tement for the p	urpose of	changi ointmer	ng its nt as r	registered egistered
SIGNATURE.	V67.00270	productions of requirered	2.00	niote.	6								
12.	Signarare, type a or		AND DIRECTORS	(NOIE	Registered Ag	eni signalu		en (einstating) ADDITIONS/CHAI	UGES TO OFFIC	DATE SEDS AND	DIDEC	TOPS	: IN 12
TITLE	P	CA 110E.1101		DELETE	1.1 TITLE			ACCITIONO IN	VOLO 10 OTTIC	CITO PURD	☐ Cha		Addition
NAME	LENNOX,	Samuel			1.2 NAME							•	
STREET ADDRESS	741 N.W.	39TH AVE.			1.3 STREE	T ADDRESS							
CITY - ST - ZIP		ERDALE FL 33311			1.4 CITY-	ST-ZIP							
TITLE	VP			DELETE	2.1 TITLE					1	Cha	nge	Addition
NAME	LENNOX,				2.2 NAME		1						
STREET ACCRESS	741 N.W.				2.3 STREE	T AODRESS	İ						
CITY-ST-ZIP	F1. LAUDE	ERDALE FL 33311		11141	2.4 CITY-	ST-ZIP				·=· · · · · · · · · · · · · ·			
TITLE	I I CAMADO A	644 W 451		DELETE	3.1 TITLE						☐ Cha	nge	Addition
NAME	LENNOX,				3.2 NAME		1						
STREET ADDRESS	741 N.W.	SBIN AVE. ERDALE FL 33311			3.3 STREE	T ADDRESS							
CITY-ST-ZIP	S S	NUMBER 1 33311		DELETE	3.4. CITY-	ST-ZIP	<b>.</b>		······································		T 1 00		T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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NAME	741 N.W.				4. 2 NAMI								
STREET ADORESS		ERDALE FL 33311				T ADDRESS							
CITY-ST-ZIP TITLE	D			DELETE	4.4 CITY - 5.1 TITLE	51 - ZIP		•			Cha	noe	Addition
NAME	LENNOX,	SAMUEL			5.2 NAME						V-10	<b>.g</b> u	
STREET ADDRESS	741 N.W.					T ADDRESS							
CITY-ST-ZIP		RDALE FL 33311			5.4 CITY -								
TITLE	1			DELETE	6.1 FITLE	w : E.F	<del> </del>	<del></del>			☐ Cha	nge	Addition
NAME					6.2 NAME							-	
STREET ADDRESS						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 is if changed, or on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR