ECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

FILED Jun 04, 1999 8:00 am Secretary of State 06-04-1999 90009 031 ***550.00

	1999 (レ)	DIVISION OF	CORPOR	ATIONS		330.00
DOCU	MENT # P950000	709951				
. Corporatio		•				
STANI'S	INTERNATIONAL DESIGN, C	ORP.				
rincinal Plac	e of Business	Mailing Address				BBORN BBYN HOON BBORD IBYN IDDIAL BYN YBDO
ETANISLAO ONORATO % ETANISLAO ONORATO						•
20 N.W. 72 AV. #120 3100 N.W. 72 AV. #120						
AMI FL 33122 MIAMI FL 33122					E IN THIS SPACE	
					3. Date Incorporated or Qualified 09/14/1995	
Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
Same 26 Sur		— ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	e		65-0607931	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, e					5. Certificate of Status Desired	\$8.75 Additional
3100 N.W. 72W # 120 27-				 `-		Fee Required
City & Star	" Micimi, florida	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 22	Country		Zip Country		8. This corporation owes the current	
3312Z 25 USA 29			30		Intangible Personal Property.	Yes No
	9. Name and Address of Current I	Registered Agent		271	10. Name and Address of New Re	gistered Agent
ONORATO, ETANISLAO				81 Name		
3100 N.W. 72 AV			[82 Street Address (P.O. Box Number is Not Acceptable)		
#120				83		
MIAMI FL 33122						7:-0-4-
			ľ	84 City	eg	FL 85 Zip Code
Pursuan	t to the provisions of sections 607.0502 a registered agent, or both, in the State of	nd 607.1508, Florida Statute	s, the abo	ve-named corpe	pration submits this statement for the pur	pose of changing its registered
office or agent. I	registered agent, or both, in the State of am familiar with, and accept the obligation	ons of, section 607.0505, Flo	autnonzed orida Statu	tes.	on s board of directors. I hereby accept	the appointment as registered
GNATURE	DEOUNTAD EL	Anaslao		//_		+102 199
	Signature, typed or printed name of registered agent a OFFICERS AND		13.	ad Agent signature req	quired when reinstating) ADDITIONS/CHANGES TO OFF	
.E	PVTS DELETE		1.1 TITL	E		Change Addition
ΛE	ONORATO, ETANISLAO			AE		
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f-ST-ZIP	MIAMI FL 33122			Y-ST-ZIP		
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GNATURE:

ZE REQUIRED

I hereby certify that the information supplied with this filing does not gualify 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 excurate 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 true and 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.

305-51) 4188

Daytime Phone #