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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000089523 (1)

1. Corpora	NADE INTERNATIONAL, INC.	3009323 (1)) JOANSON (NE JOSE) BINN BANK BANK BANK BANAL JOHN AGIN AGIN AND AGIN
Principal Pl	ace of Business	Mailing Address		
1700 N DIXIE HWY 1700 N DIXIE HWY				
STE 142 STE 142				DO NOT HIDITE IN THE ODAOF
BOCA RATON FL 33432		BOCA RATON FL 33432		DO NOT WRITE IN THIS SPACE
US		U\$		3. Date Incorporated or Qualified
2. Principa	I Place of Business	2a. Mailing Address		11/22/1995 4. FEI Number Applied For
21		26		59-1772971 65 07/ 3548 Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
[23] Zip	Country	28	Country	Trust Fund Contribution Added to Fees
24	[25]	Ζ(ρ)	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
[27]	9. Name and Address of Curren			10. Name and Address of New Registered Agent
MOORE, SEAN L 81 Name				
2900 EAST OAKLAND PARK BLVD., THIRD FLOOR			82 Street Add	Iress (P.O. Box Number is Not Acceptable)
FT. LAUDERDALE FL 33306		•		,
•			83	
			84 City	FI 85 Zip Code
11 Pureupal to the gravisions of Sections 607.05.02 and 607.1508. Florida Statutes, the above			os the spewer person corr	
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 agont, 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				
12.	Signature, typed or printed name of registered age OFFICERS AN		E Registered Agent signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPM	DELETE	1.1 TITLE	Change Addition
NAME	RODRIGUEZ, JOSE O.		1.2 NAME	
STREET ADDRESS 1700 N DIXIE HWY, SUITE 142		12	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-ZIP	
TITLE	DST	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	ADRIAZOLA-RODRIGUEZ , AN		2.2 NAME	
STREET ADDRES	1100 111 011 110 1111 1111 1111 1111	ITE 142	2 3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	DELETE	2 4 City-St-ZiP	Change Addition
TITLE NAMÉ		C) blut	3.1 TITLE 3.2 NAME	Cipings Change
STREET ADORES			3.2 NAME 3.3 STREET ADDRESS	
CITY-ST-ZIP	~		3.4. City-St-ZiP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRES	s		4.3 STREET ADDRESS	
CITY ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5 1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRES	s		5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY- ST- ZIP	
TITLE		☐ DELETE	6 1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRES	s		6.3 STREET ADDRESS	
CITY-ST-ZIP	<u> </u>		6.4 CITY - ST - ZIP	

14. Thereby cortify 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 suppliemental 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:

Ang adniasola Rodu auls

02-02-1998

561 367-7966

FILED

Feb 10 1998 8:00am

Secretary of State