Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90035 014 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P95000091626

1. Corporation Name

MENAR MARKETING INTERNATIONAL CORP

MENAR F	MARKETING INTERNATION	NAL, CO	JHP.				
Principal Place of Business Mailing Address							1 13511001 tis latet still satil 43115 satil sette (siet liste stile tiste site (siet
2025 NW 102 AVE 2025 NW 102 AVE							
#104 #104						DO NOT WRITE IN THIS SPACE	
MIAMI FL 33172 MIAMI FL 33172 US US						3. Date Incorporated or Qualifed	
US US							12/01/1995
2. Principal Place of Business 2a. Mailing A			Mailing Address	ing Address			4. FEI Number Applied For
			Maining Addition	2.030			65-0627747 Not Applicable
21 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			Suite, Apt. #, etc.				\$8.75 Additional
_			27				5. Certificate of Status Desired Fee Required
City & State			City & State				6. Election Campaign Financing S5.00 May Be
23			28				Trust Fund Contribution Added to Fees
Zip Country Zip			Zip	Country			8. This corporation owes the current year Intangible
24	25	29		30			Personal Property Tax.
	9. Name and Address of Curr	ent Regis	tered Agent				10. Name and Address of New Registered Agent
					81	Name	
MENCOS, CARLOS A				ŀ	82 Street Address (P.O. Box Number is Not Acceptable)		
2215 SW 24TH STREET							
MIAMI FL 33145				[83		
				}	84	City	85 Zip Code
							FL
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 agent, 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	Signature, typed or printed name of registered a	gent and title	if applyable (NOTI	F: Registered	Agen	nt signature requi	uired when reinstating) DATE
12.	OFFICERS /	_		13.	- U		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		☐ DELETE	1.1 111	LE		☐ Change ☐ Addition
NAME	MENCOS, CARLOS A			1.2 NA	1.2 NAME		
STREET ADDRESS	AGAE ON ANTILOTOPET			1.3 ST	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33145			1.4 CITY-ST-ZIP			
TITLE				2.1 TITLE		☐ Change ☐ Addition	
NAME	RODRIGUEZ, ZOILA C		2.2 NA	2.2 NAME			
STREET ADDRESS	31 AVENUE"A" 14-80 ZONA	7		2.3 ST	REET	TADDRESS	
CITY-ST-ZIP	CHATTERNAL A CHATTERNAL A			2. 4 CF			
TITLE			_	31 TITLE		☐ Change ☐ Addition	
NAME	_		3.2 NA				
STREET ADDRESS	2215 S.W. 24TH STREET					TADDRESS	Į.
CITY-ST-ZIP	MIAMI FL 33145			34.CI			
TITLE	Mily dail 1 E GG 1G		DELETE	4.1 111			☐ Change ☐ Addition
NAME				4.2 N	WE.		
STREET ADDRESS				4.3 ST	REET	TADORESS	
CITY-ST-ZIP				4.4 CI			
TITLE			☐ DELETE	5.1 TIT			☐ Change ☐ Addition
NAME				5.2 NA	ME	ĺ	ļ
STREET ADDRESS				5.3 ST	REET	T ADDRESS	}
CITY-ST-ZIP				5.4 CF	ry-s	iT-ZIP	
TITLE			☐ DELETE	6.1 TT	Œ		☐ Change ☐ Addition
NAME				6.2 NA	ME		
STREET ADDRESS	1			6.3 ST	REET	TADDRESS	Ì

CITY-ST-ZIP 14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

OFFICER OR DIRECTOR