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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000092016 (1)

EXPO GROUP INTERNATIONAL, INC.

Principal Place of Business 118 SOUTH WESTSHORE BOULEVARD. UNIT 248 Mailing Address

118 SOUTH WESTSHORE BOULEVARD. UNIT 248

FILED Apr 30 1997 8:00am Secretary of State



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												3. Date Inc	-	l or Qualif	fied (te of Last	*	
-	Principal P	lace of Busi	ness		2	a. M	lailing Address					4. FEI Nun						Applied Fo	or
21					26	26						65-0625587					Not Applicable		
Sulte, Apt. #, etc.				27	Suite, Apt. #, etc.						5. Certifica	ite of Stati	s Desire	d [\$8.75 Additional Fee Required				
23	City & State					City & State				6. Election Campaigr Trust Fund Contrib					\$5.00 May Be Added to Fees				
24	Zip		25	Country	29	Z ₁	ιÞ	30	Country	•		8. This cor Florida	poration h Statutes	as liability		ingible es [s. 199.032	2,
		9. Name	and	Address of Cu	rrent Reg	İster	red Agent					10. Name a	nd Addre	ss of Ne	w Regis	tered /	gent		
	ROB	ERT MILES	S						81	Name	;								
i				BLVD #218	#27	2			82	Stree	Addres	s (P.O. Box	Number is	Not Acce	eptable)				
l	TAM	PA FL 338	109												-,,				
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									84	City						FL.	85 Zi	p Code	
11	office or re	egistered a	gent, d	or both, in the S	State of Fic	rida.	.1508, Florida Sta Such change w Section 607.0505	as author	ized by	the co	d corpor rporatio	ration submit n's board of	s this state directors.	ement for I hereby a	the purp accept the	oose of ne appo	changing pintment a	its registe as registere	ed
SI	GNATURE	Signature, typed	d or prin	led name of registers	od agent and I	itle if aş	pplicable (NOTE Regis	tered Age	nt signatu	e required	when reinstaling)				DATE			
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I do hereby certify that the information supplied with this filling information indicated on this annual repert or supplemental an am an officer or director of the corporation or the receiver or appears in Block 12 or Block 13 it changes or on an attached pliod with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the or supplemental angual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that or the receiver or trislee exposured to execute this report as required by Chapter 607, Florida Statutes; and that my name