

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

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PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000011778 (3)

1. Corporation Name
TUSCAN INTERNATIONAL, INC.

Principal Place of Business
3701 NO COUNTRY CLUB DRIVE #1608
NORTH MIAMI BEACH FL 33180

Mailing Address
3701 NO COUNTRY CLUB DRIVE #1608
NORTH MIAMI BEACH FL 33180

97 AUG 28 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/07/1996	3a. Date of Last Report —
4. FEI Number 65-0642970	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
10. Name and Address of New Registered Agent	

2. Principal Place of Business 21 2851 N.E. 183 St. Suite, Apt. #, etc. 22 #110 City & State 23 Aventura FL. Zip 24 33160	2a. Mailing Address 26 2851 N.E. 183 St. Suite, Apt. #, etc. 27 #110 City & State 28 Aventura FL. Zip 29 33160	Country 30 USA
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9. Name and Address of Current Registered Agent
PEREZ, GONZALO A
3701 NO COUNTRY CLUB DRIVE #1608
NORTH MIAMI BEACH FL 33180

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 Zip Code

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 _____
(NOTE: Registered Agent's signature required when reinstating.) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D PEREZ, GONZALO A	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEREZ, GONZALO A	1.2 NAME	800000228898-9
STREET ADDRESS	3701 NO COUNTRY CLUB DRIVE #1608	1.3 STREET ADDRESS	-03/03/97-01056-013
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33180	1.4 CITY-ST-ZIP	***165.00 ***165.00
TITLE	D VALLE, VERONICA	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALLE, VERONICA	2.2 NAME	
STREET ADDRESS	3701 NO COUNTRY CLUB DRIVE #1608	2.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33180	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET 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 13, if changed, on an attachment with an address

CR2E034 (4/97)



TUSCAN INTERNATIONAL, INC.



2851 N.E. 183rd St., # 110 • Aventura, Fl. 33160 • Telephone/Fax: 305/ 466-9146

**Annual Reports Section
P.O. Box 6327
Tallahassee, Fl. 32314**

August 10, 1997

Dear Sirs:

I write to you in regards to a late notice we received for the corporation's annual filing fee for \$550.00. I must inform you that first of all, this is the first time we receive such notice, and second, it comes to us as a total surprise since we had no idea this annual fee was due every year by the month of May. Our accountant who filed the corporation last year and filed our taxes for the first time this year, certainly never informed us about this, nor did we ever receive such information through the mail.

I called your offices to explain the situation and your officer said that we were probably not properly informed also due to our change of address. Likewise, we never knew we also had to file a change of address with your division.

As I explained to your officer, this late fee is too high for our small business to handle right now. We are trying to make ends meet and this payment is over our heads at the moment. He kindly suggested I write your division explaining the situation and send the regular fee of \$165.00 to see if you could waive the late fee charges.

Due to these circumstances, I ask you to please accept our apologies for our lack of information, waive the late fee charges, and accept our check for the annual fee of \$165.00 we now attach. If you need to contact me please do so anytime through our current address and phone/fax as it appears in this letterhead.

I thank you for your attention on this matter,

Sincerely Yours,



Veronica Valle