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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000016083

1. Corporation Name

VALUES INTERNATIONAL, INC.

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90209 012 ***150.00



Principal Place of Business Mailing Address						
324 EAGLETON GOLF DRIVE 324 EAGLETON GOLF DRIVE PALM BEACH GARDENS FL 33418-8054 PALM BEACH GARDENS FL 33				Į.		
PALM BEACH GARDENS FL 33418-8054 PALM BEACH GARDENS FL 33			00410 0004		DO NOT WRITE IN THIS SPACE	
			•		3. Date Incorporated or Qualifed 02/19/1996	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	
21	26			_	65-0645624 Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27		——————————————————————————————————————	·		5. Certifcate of Status Desired	
		City & State	& State		6. Election Campaign Financing \$5.00 May Be	
23		28	<u> </u>		Trust Fund Contribution Added to Fees	
Zip			Country	/	8. This corporation owes the current year Intangible Personal Property Tax	
24	25		30		Personal Property Tax. LI Yes LI No 10. Name and Address of New Registered Agent	
,	9. Name and Address of Current	Registered Agent	81	Name		
Guthrie, Edward R 324 Eagleton Golf Drive				82 Street Address (P.O. Box Number is Not Acceptable)		
			<u> </u>			
			84		FL 85 Zip Code	
office or r agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	of Florida. Such change was au	thorized by	tne corpo	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Age	nt signature re	e required when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1,1 TITLE		☐ Change ☐ Addition	
NAME	Guthrie, Edward R	•	1.2 NAME	1		
STREET ADDRESS	324 EAGLETON GOLF DRIVE		1.3 STREE	TADDRESS	\$	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33	418-8054	1.4 CITY-8	ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition	
NAME	GUTHRIE, NANCY		2.2 NAME			
STREET ADDRESS	324 EAGLETON GOLF DRIVE		2.3 STREE	TADDRESS	\$	
-City-St-ZIP	PALM: BEACH GARDENS FL 33	418-8054	2. 4 CITY-	ST-ZIP ·	· Aug	
πιε		☐ DELETE	3.1 TITLE		. Change Addition	
NAME			3.2 NAME	f		
STREET ADDRESS	•		3.3 STREE	TADDRESS		
CITY-ST-ZIP			3.4. C/TY-	ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME	•		4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	ł	☐ Change ☐ Addition	
NAME			5.2 NAME	Ļ		
STREET ADDRESS			1	T ADDRESS	3	
CITY-ST-ZIP		<u> </u>	5.4 CITY-5	ST-ZIP		
TITLE	·	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			1	T ADDRESS		
I	1		64 CITY-9	2T 7ID		

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.