

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

FILED

Apr 03 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000018767 (9)

1. Corporation Name

MOLY-VEN INTERNATIONAL, INC.



Principal Place of Business

80 SW 8TH ST.
MIAMI FL 33130

Mailing Address

80 SW 8TH ST.
MIAMI FL 33130

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/27/1996

4. FEI Number

65-0693832

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 9769 S. DIXIE HWY.

26 9769 S. DIXIE HWY.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 SUITE 103

27 SUITE 103

City & State

City & State

23 MIAMI, FL

28 MIAMI, FL

24 Zip

Country

29 Zip

Country

24 33156

25 MIAMI-DADE

29 33156

30 MIAMI-DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SOLOMON, DAVID
80 SW 8TH ST., STE. 2068
MIAMI FL 33130

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

9769 S. DIXIE HWY

83

SUITE 103

84 City

MIAMI

FL

85 Zip Code

33156

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]
Signed, typed or printed name of registered agent and title if applicable

DAVID SOLOMON, DIRECTOR

1/7/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SOLOMON, DAVID
5101 COLLINS AVE.
MIAMI BEACH FL 33140

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
D, P ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
NURAEF, HEDY
5101 COLLINS AVE.
MIAMI BEACH FL 33140

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MARQUEZ, GONZALO
8343 LAKE DR., #102
MIAMI FL 33166

☒ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
D, V
OGDEN, RICHARD W.
5590 SW 92 ST.
MIAMI, FL 33156 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

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.

SIGNATURE:

[Signature] DAVID SOLOMON, DIRECTOR (305) 669-5540

CR2E034 (10/97)