

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED  
Apr 23 1998 8:00am  
Secretary of State

DOCUMENT # P96000024751 (5)  
1. Corporation Name

INTERNATIONAL MICHAEL CORPORATION

Principal Place of Business: 123 SE 3RD AVENUE #371  
MIAMI, FLORIDA 33131  
Mailing Address: 123 SE 3RD AVENUE #371  
MIAMI, FLORIDA 33131

DO NOT WRITE IN THIS SPACE

|                                                                                                                                                             |                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| 3. Date Incorporated or Qualified<br>03/20/1996                                                                                                             |                                |
| 4. FEI Number<br>65-0652421                                                                                                                                 | Applied For<br>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 delinquent Personal Property tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No |                                |

|                                |                         |
|--------------------------------|-------------------------|
| 2. Principal Place of Business | 2a. Mailing Address     |
| 21. Suite, Apt. #, etc.        | 26. Suite, Apt. #, etc. |
| 22. City & State               | 27. City & State        |
| 23. Zip                        | 28. Zip                 |
| 24. Country                    | 29. Country             |

9. Name and Address of Current Registered Agent

OTERO, MIGUEL A  
7360 CORAL WAY #21  
MIAMI, FLORIDA 33155

10. Name and Address of New Registered Agent

|                                                        |
|--------------------------------------------------------|
| 81. Name                                               |
| 82. Street Address (P.O. Box Number is Not Acceptable) |
| 83. City                                               |
| 84. State                                              |
| 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

Signature of the person or persons authorized to sign this statement

NOTE: Registered Agent signature and when signing

DATE

| 12. OFFICERS AND DIRECTORS |                      | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                   |
|----------------------------|----------------------|-------------------------------------------------------|-------------------------------------------------------------------|
| TITLE                      | PSD                  | 1.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | OTERO, MIGUEL A      | 1.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 123 SE 3RD AVE # 371 | 1.3 STREET ADDRESS                                    |                                                                   |
| CITY- ST- ZIP              | MIAMI, FLORIDA 33131 | 1.4 CITY- ST- ZIP                                     |                                                                   |
| TITLE                      | VP                   | 2.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | MARIA NUNEZ          | 2.2 NAME                                              |                                                                   |
| STREET ADDRESS             | 123 SE 3RD AVE # 371 | 2.3 STREET ADDRESS                                    |                                                                   |
| CITY- ST- ZIP              | MIAMI, FLORIDA 33131 | 2.4 CITY- ST- ZIP                                     |                                                                   |
| TITLE                      |                      | 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                      |                      | 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                      |                      | 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                      |                      | 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                                     |                                                                   |

100002493051  
-04/24/98--01018--034  
\*\*\*150.00

PC  
4-23

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/16/98

Date

Signature of Agent