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 # P96000027866 (8)

AKUREYRI INTERNATIONAL, INC.

.#* 1883 													
Principal Place of Business Mailing Address								1 IDBIII PAL FIE IURIO DIAIN DUAIN DUNIN BUNIN	DESCRIPTION	1001 (0100)		ili i li ii	
100 N BISCAYI MIAMI FL 3313		E 1707	100 N BISC Miami FL 3	CAYNE BLVD 8 33132-2324	STE 1707								
t res								3. Date Incorporated or Qualified 3a. Date of Last Report 04/05/1996					
2. Principal P	lace of Busi	ness	2a. Mailing	2a. Mailing Address				4. FEI Number	Um		Appl	lied For	
21		·	26					65-06598	75		Not A	Applicable	
Sulte, Apt.	#, etc.		- -1	Suite, Apt. #, etc.				5. Certificate of Status Desired				lditional	
22				27							Requ		
City & State	•		i	City & State				6. Election Campaign Financing	, , , , , , , , , , , , , , , , , , , ,				
23 Zin	ip . Country			28				Trust Fund Contribution					
Zip	::	25	Ζφ 29	n				8. This corporation has liability for intengible tax under s. 199 Florida Statutes Yes No			99.032,		
24	Q Name	and Address of Curr		nent	30			10. Name and Address of New Re-					
RED	GER, DAV		on regional re	Ho		B1	Name	10. 110110 0110 11010 11010 11010	gistored P	- Spill			
					Į								
100 N BISCAYNE BLVD STE 1707 MIAMI FL 33132							Street Add	ress (P.O. Box Number is Not Acceptab	ptable)				
 								10000					
					\	83							
						84	City		FL	85 Z	Zip Co	ode	
11. Pursuant I	n the provis	sions of Sections 607.0	502 and 607 1508	Florida Stati	tes the at	I	e named corr	poration submits this statement for the p		changin.	n ite i	registered	
office or re	egistered a	ont, or both, in the Sta	le of Florida, Such	change was	authorized	by	the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	the appo	pintment	as re	gistered	
4.5	m lamiliar w	ıın, and accept me obi	igations of, Section	n 607.0005, r	iorida State	nes	S.						
SIGNATURE	Signature, types	or printed name of registered a	rgent and title Jappheab	ie (NC	II Registered	Ape	nt sionature requi	red when reinstating)	DATE				
12.			ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC		DIRECT	ORS	IN 12	
TITLE	D			DITEIE						Chang	ge :	Addition	
NAME		S-MOLINOS, PILAR		1.23									
STREET ADDRESS		SCAYNE BLVD STE	1707	/07			ADORESS						
CITY-ST-ZIP	Miami Fi	. 33132					1 - ZIP					İ	
TITLE				☐ DELETE	2.1 1 1	LE				Chang	ge	Addition	
NAME													
STREET ADDRESS					2.3 \$1	KEE1	ADDRESS						
CITY-ST-ZIP					2. 4 0	1Y-S	S1 - 21P						
गाप				DELETE	3.1 111	f E				Chang	ge	Addition	
NAME =					3.2 NA	Mf							
STREET ADDRESS					3.3 ST	REET	ADDRESS					ı	
CITY-ST-ZIP					3.4. C	IY-S	ST - ZIP						
TITLE				DELFTE	4.1 111	LE				Chang	ge	Addition	
NAME					4. 2 N/	MF							
STREET ADDRESS					4.3 \$16	REET.	ADDRESS						
CITY-ST-ZIP					4.4 CH	Y - \$1	1 - ZIP						
TITLE	_			DELETE	5.1 Т(7	LE.				Chang	ge i	Addition	
NAME					5.2 NA	ME						į	
STREET ADDRESS	1()	A. 7			53 \$1	HEET	ADDRESS						
CITY-ST-ZIP					5.4 C/T	Y-\$	1 - 7/P		·				
TOTLE				DECETE:	6.1 TiT	LE				Chang	ge	Addition	
NAME					G.2 NA	ME							
STREET ADDRESS			1		6.3 \$16	REET.	ADORESS						

6.4 CITY - ST - 7IP

I do hereby certify that the information supplied with this fifting does not qualify for the examption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplementar annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of 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. 1954) 929-

FILED

Apr 25 1997 8:00am

Secretary of State