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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000028894 (9)

F.C. ONE INTERNATIONAL, INC.

Principal Place	e of Business	Mailing Address	Mailing Address			ן פוען נווען שניום ושניים וועים וויים וויים וויים וויים פויוים שניום שניום ושניים וויים אינוען שניים וויים ויי 		
6767 COLLINS	S AVENUE	777 BRICKELL AVE						
#2103	. FI 604-0	#950				DO NOT WRITE IN THIS !	SDACE	
MIAMI BEACH FL 33140		MIAMI PL 33131	MIAMI FL 33131		3. Date Incorporated or Qualified			
						04/03/1996		
2, Principal P	lace of Business	2a. Mailing Address				4. FEt Number	A	pplied For
21		26				65-0669104	. N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	•	Additional
22		27				<u> </u>		equired
City & State		City & State	<u> </u>			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
23 Zip	Country	[28] Zip	Country			Trust Fund Contribution		
24	25	29	30	and y		This corporation owes or has paid the cur Personal Property Tax due June 30.	- · -	No No
27	g. Name and Address of Curr		1301	T		10. Name and Address of New Registered		
10	PEZ-GARCIA, JORGE L			В1	Name			
	7 BRICKELL AVENUE			82	Stroot Addre	ess (P.O. Box Number is Not Acceptable)		
	ITE 9 50			02	Street Addre	(algebras 10. Dox Number 18 Not Acceptable)		
	AMI FL 33131			83				
				84	City		85 Zip	Code
					Oity	FL	53 2.49	
office or r	egistered agent, or both, in the Sta	ite of Florida. Such change was	authorize	ed by	the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing i ointment as	ts registered registered
	m familiar with, and accept the obl	igations of, Section 607 0505, FI	lorida Sta	alutes	š. ,	, , ,		-
SIGNATURE	Signature, typed or printed name of registeres a	sycul and tile if applicable (NO	Tf : Registen	nd Age	nt signature require	pd whon reinstating) DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	_	
TITLE	VP SD	☐ DELETE		1.1 TITLE			☐ Change	Addition
NAME	FOGLIATI, MARIA T		1.21	IAME				
STREET ADDRESS	6767 COLLINS AVE. 32103		1.3 \$	STREET	ADDRESS			
CITY-ST-ZIP			_	CITY-S	T - ZiP		1 05	T Address
TITLE	PTD ANDREA	☐ DELETE					L Change	Addition
NAME	CHIAPPA, ANDREA			NAME				
STREET ADDRESS	6767 COLLINS AVENUE MIAMI BEACH FL 33140				ADDRESS			
CITY-ST-ZIP TITLE	MIAMI DEACH FL 33140	DFLETE	3.1 1	CITY - S	51 - ZIP		Change	Addition
NAME		_ oraci		NAME			- Armingo	
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				CITY-S	- 1			
TITLE		DELETE	_	ITLE			☐ Change	Addition
NAME			4.2	NAME			-	
STREET ADDRESS			4.3 9	STREET	ADDRESS			
CITY-ST-ZIP			4.4 (CITY-S	T - ZIP			
TITLE		DELETE	5.1 1	TITLE			☐ Change	Addition
NAME					ı			
			5.21	NAME	1			
STREET ADDRESS					ADDRESS			
STREET ADDRESS City-\$t-zip			5.3 \$					
		DELETE	5.3 \$	STREET CITY-S			☐ Change	☐ Addition
CITY-ST-ZIP	·	DELETE	5.3 S 5.4 C 6.1 T 6.2 N	STREET CITY-S TITLE NAME			☐ 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.