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## 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 # P96000040474

1. Corporation Name

ONE BISCATINE TOWER SUITE 3400 TWO SOUTH BISCATINE BLVD. WARM FL 30131-1897  2. Principal Place of Business 2. Analysis Address 2. Principal Place of Business 3. Date Incorporated or Qualified 05/08/1996  3. Date Incorporated or Qualified 05/08/1996  3. Date Incorporated or Qualified 05/08/1996  4. FEI Number 65-08/81916  Suite, Apt. #, etc. 27  Suite, Apt. #, etc. 27  City & State 28  City & State 39  City & State 30  Suite, Apt. #, etc. 31  29  Country 2p  Country 2p  Country 3p  8. This corporation owes the current year Intanglies Personal Property Tax.  Name and Address of Current Registered Agent  VALDES-FAULI CORPORATE SERVICES, INC. ONE BISCAYNE TOWER, SUITE 3400 TWO SOUTH BISCAYNE BLVD. MIAMI FL 33131-1897  11. Pursuant to the provisions of Sections 697,0502 and 807,1506, Florida Statutes, the above-named corporation's aborted of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes, Decided by the corporation's board of directors. I hereby accept the appointment as registered agent.  11. Pursuant to the provisions of Sections 607,0502 and 807,1506, Florida Statutes, the above-named corporation's aborted of directors. I hereby accept the appointment as 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, and the provisions of Sections 607,0505, Florida Statutes, the above-named corporation's aborted of directors. I hereby accept the appointment as registered agent, and the purpose of changing its registered office or registered agent, and the purpose of changing its registered agent. I am familiar with, and accept the ediplosions of, Section 607,0505, Florida Statutes.  11. Pursuant to the provisions of Sections 607,0502 and 607,0505, Florida Statutes.  12. OFFICERS AND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  CARDOZO, PATRICK  60 RUE GERRARD  CARDOZO, PATRICK  60 RU		JUKI TELECUM, INC.	Mailing Address			_						
TWO SOUTH BISCAYNE BLVD. MIAMI FL 33131-1897  TWO SOUTH BISCAYNE BLVD. MIAMI FL 33131-1897  TWO SOUTH BISCAYNE BLVD. MIAMI FL 33131-1897  3. Date incorporated or Qualified  05/08/1996  4. FEI humber   Applied For  55/08/1996  5. Certificate of Status Desired   Staty 55 Additional Fee Required  City & State   City & Stat												
MAMI FL 33131-1897  MIAMI FL 33131-1897  MIAMI FL 33131-1897  DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed  05/08/1996  4. FEI Number  65-088/196  Do NOT WRITE IN THIS SPACE  3. Date incorporated or Qualifed  05/08/1996  4. FEI Number  65-088/196  Do Not Applicable  65-088/196  Not Applicable  Suite, Apt. #, etc.  27  Suite, Apt. #, etc.  27  City & State  VALDES-FAULI CORPORATE SERVICES, INC.  ONE BISCAYNE TOWER, SUITE 3400  TWO SOUTH BISCAYNE BLVO.  MIAMI FL 33131-1897  84  City  FL 85  Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation sbard of directors. I hereby accept the appointment as registered agent. In mainfair with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation sbard of directors. I hereby accept the appointment as registered agent. In Time  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  CARDOZO, PATRICK  STREET ADDRESS  OR VLE GERRARD  CHANGES  OR VLE GERRARD  CHANGES  CONTYST-2P  PETION VILLE, HAITI  DELETE  11 TITLE  S ARBOLICANS  SINEET ADDRESS  CONTYST-2P  PETION VILLE, HAITI  DELETE  11 TITLE  S ARBOLICANS  SINEET ADDRESS  SINEET ADDRESS	TWO SOUTH BISCAYNE BLVD. TWO SOUTH BISCAYNE BLVD.									,		
3. Date Incorporated or Qualified O5/08/1996  2. Principal Place of Business								DO NOT WRITE IN THIS SPACE				
2. Principal Place of Business	WILLIAM I E GO	01 1007					3.	Date Incorporated or Qualifed				
Suite, Apt. #, etc.   Scriffcate of Status Desired   \$8.75 Additional Fee Required   Fee R								05/08/1996				
Suite, Apt. #, etc. Suite,	2. Principal	Place of Business	2a. Mailing Address				4.	FEI Number			Appli	ied For
Suite, Apt. #, etc.    Suite, Apt. #, etc.   27	21		26					65-0681916			Not /	Applicable
City & State  Country  Country  Country  Country  Country  Exp  Country  Exp  Country  Exp  Country  B. This corporation owes the current year Intangible Personal Property Tax.  Personal Property Tax.  Name and Address of Current Registered Agent  VALDES-FAUL CORPORATE SERVICES, INC.  ONE BISCAYNE TOWER, SUITE 3400  TWO SOUTH BISCAYNE BLVD.  MIAMI FL 33131-1897  84 City  FL  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 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, 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, 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, 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, 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, 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, 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, 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, or both, in the State of Florida. Such change was authorized by the corporat		t. #, etc.			-		1_			\$8.	75 Ad	ditional
City & State 28	22		27				5.	Certificate of Status Desired	П	Fe	e Requ	uired
Zip   Country   Zip   Country   Strice   Country   Country   Country   Country   Country   Strice   Country		ate				-	6.	Election Campaign Financing		\$5	.00 M	lay Be
Zip	23		28	ه ا				Trust Fund Contribution		Ad	ded to	Fees
9. Name and Address of Current Registered Agent  VALDES-FAUL CORPORATE SERVICES, INC. ONE BISCAYNE TOWER, SUITE 3400 TWO SOUTH BISCAYNE BLVD. MIAMI FL 33131-1897  84 City FL 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signature, typed or printed name of registered agent and title if approache  OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  OFFICERS AND DIRECTORS 1.3 STREET ADDRESS  ORVE GERRARD PETION VILLE, HAITI  CARDOZO, LLOYD  OR USERNAND STREET ADDRESS  OR USE GERRARD PETION VILLE, HAITI  DELETE  J AMME STREET ADDRESS  OR USE GERRARD PETION VILLE, HAITI  DELETE  J AMME STREET ADDRESS					Country			This corporation owes the curre	nt year Inta	ingible		
VALDES-FAULI CORPORATE SERVICES, INC. ONE BISCAYNE TOWER, SUITE 3400 TWO SOUTH BISCAYNE BLVD. MIAMI FL 33131-1897  82   Street Address (P.O. Box Number is Not Acceptable)  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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, Suite agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, hyper or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  DP	24	25	29	30								No
VALDES-FAULI CORPORATE SERVICES, INC. ONE BISCAYNE TOWER, SUITE 3400 TWO SOUTH BISCAYNE BLVD. MIAMI FL 33131-1897  84			rent Registered Agent				10.	Name and Address of New Ro	gistered A	gent		
SIGNATURE    Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE	TW MIA	TO SOUTH BISCAYNE BLVD.  AMI FL 33131-1897  Into the provisions of Sections 607.	0502 and 607.1508, Florida Stat	utes, the ab	84 pove-	named corn	oration	n submits this statement for the pard of directors. I hereby accept	urpose of o	changir	na its re	egistered
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE DP DELETE 1.1 TITLE  NAME CARDOZO, PATRICK STREET ADDRESS 60 RUE GERRARD PETION VILLE, HAITI  TITLE S DELETE 2.1 TITLE  NAME CARDOZO, LLOYD STREET ADDRESS 60 RUE GERRARD  DELETE 2.1 TITLE  S DELETE 2.1 TITLE  NAME CARDOZO, LLOYD STREET ADDRESS 60 RUE GERRARD  TITLE S DELETE 2.1 TITLE  STREET ADDRESS 60 RUE GERRARD  TITLE S DELETE 2.1 TITLE  NAME CARDOZO, LLOYD STREET ADDRESS 60 RUE GERRARD  TITLE S CARDOZO, LLOYD STREET ADDRESS 60 RUE GERRARD  STREET ADDRESS 60 RUE GERRARD  TITLE S STREET ADDRESS 60 RUE GERRARD  STREET ADDRESS 61 STREET ADDRESS  STREET ADDRESS 61 STREET ADDRESS  STREET ADDRESS 61 STR		•										
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NAME CARDOZO, PATRICK  STREET ADDRESS  60 RUE GERRARD  CITY-ST-ZIP  PETION VILLE, HAITI  TITLE  S  CARDOZO, LLOYD  STREET ADDRESS  CITY-ST-ZIP  PETION VILLE, HAITI  DELETE  21 TITLE  STREET ADDRESS  CITY-ST-ZIP  PETION VILLE, HAITI  DELETE  23 STREET ADDRESS  CITY-ST-ZIP  PETION VILLE, HAITI  DELETE  31 TITLE  32 NAME  32 NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS	12.							ADDITIONS/CHANGES TO OFF	ICERS ANI			
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	NAME			3.2 NA	ME							
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CSY-ST-AP 1	CITY-ST-ZIP	1		3.4 CIT	ry-st	-ZIP				<u> </u>		

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 supplied that 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 of the receiver or trusted 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 on an attachment with an address, with all other like empowered.

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADORESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

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Addition