FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Mar 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P96000044550 (7)**

1. Corporation Name
BUSINESS RISKS INTERNATIONAL, INC.

Principal Place of Business
8932 SW 142ND AVENUE
SUITE 810
MIAMI FL 33186

Mailing Address
8932 SW 142ND AVENUE
SUITE 810
MIAMI FL 33186-1290

3. Date Incorporated or Qualified: 05/24/1996
3a. Date of Last Report:

2. Principal Place of Business
21 13605 SW 104 Terrace
22 Suite, Apt. #, etc.
23 City & State: Miami, FLORIDA
24 Zip: 33186 ~~Florida~~
25 Country: US

2a. Mailing Address
26 12973 SW 112th St.
27 Suite, Apt. #, etc.: Suite 163
28 City & State: Miami, Florida
29 Zip: 33186
30 Country: U.S.

4. FEI Number: 65-0672063 — 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
RAMIREZ, DAVID F
8932 SW 142ND AVENUE
SUITE 810
MIAMI FL 33186

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 12973 SW 112th Street
83 Suite 163
84 City: Miami FL 85 Zip Code: 33186

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 New or Resigning Registered Agent and Title if Applicable (NOTE: Registered Agent signature required when reinstating) DATE 3/11/97

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	RAMIREZ, DAVID F
STREET ADDRESS	8932 SW 142ND AVENUE, SUITE 810
CITY-ST-ZIP	MIAMI FL 33186

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P President
1.2 NAME	Ramirez, David
1.3 STREET ADDRESS	12973 SW 112th St. Suite 163
1.4 CITY-ST-ZIP	Miami, FL. 33186

☒ Change ☐ Addition

14. I do 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 3/11/97 Date 305-386-6004 Daytime Phone #

CR2E034 (9/96)