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Apr 18 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 # P96000062228 (7)

1. Corporation Name

INTERNATIONAL TREASURES II, INC.

Principal Place of Business

7491 W OAKLAND PARK BLVD SUITE 306
FT LAUDERDALE FL 33319

Mailing Address

7491 W OAKLAND PARK BLVD SUITE 306
FT LAUDERDALE FL 33319-4979



3. Date Incorporated or Qualified

07/23/1996

3a. Date of Last Report

2. Principal Place of Business

21 6500 S.W. 79th COURT
Suite, Apt. #, etc.

22 MIAMI, FLORIDA
City & State

23 33143
Zip

24 USA
Country

2a. Mailing Address

26 6500 S.W. 79th COURT
Suite, Apt. #, etc.

27 MIAMI, FLORIDA
City & State

28 33143
Zip

29 USA
Country

4. FEI Number

65-0684651

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$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

SINKLE, DEBRA
7491 W OAKLAND PARK BLVD SUITE 306
FT LAUDERDALE FL 33319

10. Name and Address of New Registered Agent

81 Name

THERESA ASHKAR

82 Street Address (P.O. Box Number is Not Acceptable)

6500 SW 79th COURT

83

MIAMI, FLORIDA

84 City

FL

85 Zip Code

33143

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

Theresa Ashkar
Signature, typed or printed name of registered agent and title, if applicable.

(THERESA ASHKAR)
(NOTE: Registered Agent signature required when reinstating)

4/09/97
Date

12. OFFICERS AND DIRECTORS

TITLE D
NAME ASHKAR, THERESA N
STREET ADDRESS 7491 W OAKLAND PARK BLVD SUITE 306
CITY-ST-ZIP FT LAUDERDALE FL 33319

TITLE D
NAME SINKLE, DEBRA
STREET ADDRESS 7491 W OAKLAND PARK BLVD SUITE 306
CITY-ST-ZIP FT LAUDERDALE FL 33319

TITLE D
NAME EPSTEIN, ROSA
STREET ADDRESS 21130 NE 23RD AVE
CITY-ST-ZIP MIAMI FL 33180

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

Theresa Ashkar
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/07/97
Date

305-279-1297
Daytime Phone #

CR2E034 (9/96)