


FILED
May 13, 1999 8:00 am
Secretary of State

05-13-1999 90026 037 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000069617 1. Corporation Name ProKini Communications, Inc.			
Principal Place of Business		Mailing Address	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	08-21-90
22	City & State	27	4. FEI Number
23	Zip	28	65-0688425
24	Country	29	5. Certificate of Status Desired
25	33177	30	USA
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Sierra, Jim.		81 Name	
9290 SUNSET DR. 72nd AVE		82 Street Address (P.O. Box Number is Not Acceptable)	
STE 105		83	
Miami FL 33173		84 City	
		85 Zip Code	
		FL 33177	
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		DATE	
[Signature]		04-20-99	
Signature, typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
Pres.	SANTOS, JOSE J.	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
NAME	13550 SW 182 ST	2.1 TITLE	2.2 NAME
STREET ADDRESS	13550 SW 182 ST	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
CITY-ST-ZIP	Miami FL 33177	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 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, with all other like empowered.

SIGNATURE: [Signature] President

04/20/99 (305) 253-4957

CR2E034 (11/98)