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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000071763 (2)

JAZMIN TRADING INTERNATIONAL, INC.

FILED Apr 18 1997 8:00am Secretary of State



Principal Frace of business			Maling Address							
5700 N.W. 22ND AVENUE MIAMI FL 33142			5700 N.W. 22ND AYENUE Miami Fl 33142-3006							
							3. Date incorporated or Qualified 08/28/1996	3a. Dat	e of Las	st Report
2. Principal Place of Business			2a. Mailing Address				4. FEI Number / D(-02	11/10	<u> </u>	Applied For
21			26				65-0097	447		Not Applicabl
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	П		5 Additional
22			27				6. Certificate of Status Education		Fee	Required
City & State	3	L	City & State				6. Election Campaign Financing	<i>~</i>		00 May Be
23		28					Trust Fund Contribution	<u>u/</u>		led to Fees
Zip	Country		Zip	Coul	ntry		8. This corporation has liability for	ntarigible i	iax unde	ar s. 199.032,
24	25 9. Name and Address of Curre	29	ored Acout	30			Florida Statutes 10. Name and Address of New Re	Yes [
PTA1		ur negier	ereu Agerit		81	Name	IV. Hallip alla Radiose di Haw Ho	91010104	-90111	
	yem, yaser) n.w. 22nd avenue									
			82 Street Address (P.O. Box Number is Not Accept			le)				
MIAN	VII FL 33142			ŀ	B3					
				ŀ						
					84	City		FL	85 2	Zip Code
11 Pursuant I	to the provisions of Sections 607.05	02 and 60	7.1508 Florida Statu	ites, the at	OOVE	l e-named co	rporation submits this statement for the p	urpose of	changir	ng its registere
office or n	egistered agent, or both, in the Sta	e of Florid	ia. Such change was	authorized	d by	the corpor	ration's board of directors. I hereby accep	of the appo	ointment	t as registered
	m tamiliar with, and accept the obii	ganons or,	, 360000 607.0305, 6	ionoa otat	uios	.				
SIGNATURE	Signature, typical or printed name of registered a	gert and title I	l applicable. (NO	TE: Registered	o Age	ent signatura rec	quired when reinstalling)	DATE		
12.	OFFICERS A	ND DIREC	TORS	13.			ADDITIONS/CHANGES TO OFFIC	CERS AND		
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NAME				6.2 N		T ADDDECC				
STREET ADDRESS						T ADDRESS				
CITY-ST-ZIP		the state of the state	in Elina dans not pue			ST-ZIP	ted in Section 119 07/3/(i) Florida Statute	e d furtho	contifu	that the

r up necessary 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.

Daytime Phone #