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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P96000073546 (9)

CITI TRANSLATION CENTER, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place	of Business	Mailing Address			
TOWERS OF QUAYSIDE I PENTHOUSE B		TOWERS OF QUAYSIDE I			
1000 QUAYSIDE TERRACE		1000 QUAYSIDE TERRACE MIAMI FL 33138		DO NOT WRITE IN THIS SPACE	
MIAMI FL 331	36	MIAMI EL 33130		3. Date Incorporated or Qualified	
				09/03/1996	1
2. Principal Pl	ace of Business	2a, Mailing Address		4. FEI Number	Applied For
21 1025	Kane Concourse	26 1025 Kane	Concourse	65-0705889	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 5	1.t. # 208	27 JUI	te # 208	5. Certificate of Status Desired	Fee Required
City & State		City & State	TJ. FL	6. Election Campaign Financing	\$5.00 May Be
23 May t	tarbox 13, FL	28 Bay Harbor	J-7		Added to Fees
- Zin	Country ()	- Zip 2315 L	Country US	8. This corporation owes or has paid	
24 271	9 Name and Address of Curren	1	30	Personal Property Tax due June 3 10. Name and Address of New Regi	
		r uedisteleo waelir	81 Name	1 1 1 1 2	0-,-/
VALROTH-SADURNI, STEPHEN P					
999 BRICKELL AVE 82 Street Address (P.O.S.UITE 1006				ess (P.O. Box Number is Not Acceptable	"#1008
0011E 1000				GON / TONG OF	7
MIA	WII FL 33131				
			84 City	1 ianu	FI 85 3050% &
44 Dureupat	to the provisions of Sections 607.050	2 and 607 1508 Florida Statute	s the above-pamed corr	poration submits this statement for the pu	rpose of changing its registered
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.					
	m familiar with, and accept the obliga	ations of, Section 607.0505, Fib	riua Statutes.		
SIGNATURE	Signature, typod or printed name of its instered age	A mile capple able (NOTE	Registered Agent signature requi	red when reinstating)	DATE
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	Đ	☐ OELETE	1.1 TITLE		Change Addition
NAME	CARDENAS C., LIC MIGUEL /		1.2 NAME		
STREET ADDRESS	AV CHAPULTEPEC 471 SUITE		1.3 STREET ADDRESS		
CITY-ST-ZIP	COL JUAREZ MEXICO DE CP		1.4 CITY+ST-ZIP		Characa Addition
TITLE	D	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CARDENAS C., LIC L	- 400	2.2 NAME		
STREET ADDRESS	AV CHAPULTEPEC 471 SUITI		2.3 STREET ADDRESS		
CITY-ST-ZIP	COL JUAREZ MEXICO DF CP		2.4 CITY-ST-ZIP		Change Addition
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS					
CITY - ST - ZIP		T DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
TITLE			4. 2 NAME		
NAME PARKEY ADDRESS			4.3 STREET ADDRESS		
STREET ADDRESS			4.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY+ST-ZIP		
## I boroby	negative that the information supplied a	ith this filing does not qualify fo	y the exemption stated in	Section 119.07(3)(i), Florida Statutes, I f	urther certify that the information

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.

CICNIATURE.

4/15/98

(305)868-1746