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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000077900 (4)

ANTEII INTERNATIONAL, INC.

## FILED May 05 1998 8:00am Secretary of State

| cipal Place of Business Mailing Address  |  | - I TOO TOO THE FOLLY DIGHT ONLY BOND OF THE OUTER   | LOCAL (SOLO IDEAL DOSILI CÓNI LODE |
|--|--|--|------------------------------------|
| 10821 N KENDALL DR 10621 N KENDALL DR  |  |  |                                    |
| SUITE #200 SUITE #200 MIAMI FL 33176   |  | DO NOT WRITE IN TH   | IIS SPACE                          |
| WIRMITE SSITE  |  | 3. Date Incorporated or Qualified  |                                    |
|  |  | 09/09/1996   |                                    |
| 2. Principal Place of Business 2a. Mailing Address   | L 3.C A  | 4. FEI Number  | Applied For                        |
| 21 4632 SW 35 AVE 26 4632 SW. Sulle, Apt. #, etc.  | 1 35 AVE   | 65-0694655   | Not Applicable                     |
| 22 27  |  | 5. Certificate of Status Desired   | \$8.75 Additional<br>Fee Required  |
| City & State City & State  | 7 1  | 6. Election Campaign Financing   | \$5.00 May Be                      |
| 23 Ft. LANDERDALE FL 28 Ft. Landerd  | Pale FL  | Trust Fund Contribution  | Added to Fees                      |
| Zip Country USA 33312 3  | Country USA  | 8. This corporation owes or has paid the   |                                    |
| 24 333/2 25 USA 29 333/2 3<br>9. Name and Address of Current Registered Agent  | 0 024  | Personal Property Tax due June 30.  10. Name and Address of New Register                       | Yes No                             |
| RI Name  |  |  |                                    |
| 10621 N KENDALL DR   |  | avid St. Clain   |                                    |
| SUITE #200   | 82 Street Addre  | ss (P.O. Box Number is Not Acceptable)   |                                    |
| MIAMI FL 33176   | 83   |  | •                                  |
|  | 84 City  |  | 85 Zip Code                        |
|  | 1 1-4  | ·Lauderdaly F  | L 355/2                            |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes office of segistered agent, of both, in the State of Florida. Such charge was aut | , the above-named corpo<br>thorized by the corporation | pration submits this statement for the purpose<br>on's board of directors. I hereby accept the | e of changing its registered       |
| office of solstered agent, of both, in the Sate of Florida. Such charge was aut<br>agent. I am familiar with, and assort the of ligation of Saction 587.0505, Florid | da Statutes.   | 4/2  | 160                                |
| SIGNATURE Signature, typed or printed name of registered agent and the diagnication (NOTE Registered Agent signature required when reinstailing)  DATE               |  |  |                                    |
| 12. OFFICERS AND DIRECTORS   | 13.  | ADDITIONS/CHANGES TO OFFICERS A  | · ,                                |
| TITLE DELETE   | 1.1 TITLE  |  | Change Addition                    |
| NAME HENTSCHEL, OSCAR  | 1.2 NAME   |  | 1;                                 |
| STREET ADDRESS 7440 SW 125TH ST  | 1.3 STREET ADDRESS                                     |  |                                    |
| CITY-ST-ZIP MIAMI FL 33156   | 1.4 CITY-ST-ZIP  |  | Change   Addition                  |
| NAME ST CLAIR, DAVID   | 2.1 TITLE<br>2.2 NAME                                  |  | Change Addition                    |
| STREET ADDRESS 4632 SW 35TH AVE  | 2.3 STREET ADDRESS                                     | •  |                                    |
| CITY-ST-ZIP FT LAUDERDALE FL 33312   | 2. 4 CITY-ST-ZIP                                       |  |                                    |
| TITLE DELETE   | 3.1 TITLE  |  | Change Addition                    |
| NAME   | 3.2 NAME   |  |                                    |
| STREET ADDRESS   | 3.3 STREET ADDRESS                                     |  |                                    |
| CITY-ST-ZIP  | 3.4. CITY-ST-ZIP                                       |  |                                    |
| TITLE LI DELETE  | 4.1 TITLE  |  | ☐ Change ☐ Addition                |
| STREET ADDRESS   | 4. 2 NAME<br>4.3 STREET ADDRESS                        |  |                                    |
| CITY-ST-ZIP  | 4.4 CITY-ST-ZIP  |  |                                    |
| TITLE DELETE   | 5.1 TITLE  |  | Change Addition                    |
| NAME   | 5.2 NAME   |  |                                    |
| STREET ADDRESS   | 5.3 STREET ADDRESS                                     |  |                                    |
| CITY-ST-ZIP  | 5.4 CITY-ST-ZIP  |  |                                    |
| TITLE DELETE   | 61 TITLE   |  | Change Addition                    |
| NAME   |  |  |                                    |
| CTRECT ADDRESS   | 6.2 NAME   |  |                                    |
| STREET ADDRESS CITY-ST-ZIP   | 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP            |  |                                    |