


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

FILED

May 13 1998 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		 <b>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT # P96000079944 (0)</b> 1. Corporation Name <b>STRATEGIC INTERNATIONAL MARKETING GROUP, INC.</b>			
Principal Place of Business <b>11900 Biscayne Blvd. Ste. #760 Miami, Florida 33181</b>		Mailing Address <b>11900 Biscayne Blvd. Ste. #760 Miami, Florida 33181-2726</b>	
2. Principal Place of Business 21 <b>2450 N.E. Miami Gardens Dr</b> Suite, Apt. #, etc. 22 <b>2nd Floor</b> City & State 23 <b>North Miami Beach, FL</b> Zip 24 <b>33180</b>		2a. Mailing Address 26 <b>2450 N.E. Miami Gardens Dr</b> Suite, Apt. #, etc. 27 <b>2nd Floor</b> City & State 28 <b>North Miami Beach, FL</b> Zip 29 <b>33180</b> Country 30 <b>Miami-Dade</b>	
9. Name and Address of Current Registered Agent <b>Supraski, Louis A., Esq. 11900 Biscayne Boulevard, #760 Miami, Florida 33181</b>		10. Name and Address of New Registered Agent 81 Name <b>Supraski, Louis A., Esq.</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>2450 N.E. Miami Gardens Drive</b> 83 <b>2nd Floor</b> 84 City <b>North Miami Beach, FL</b> 85 Zip Code <b>33180</b>	
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 _____ (Signature: typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>Supraski, Louis A. 11900 Biscayne Blvd., #760 Miami, Florida, 33181</b>	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP	D <b>Supraski, Louis A. 2450 N.E. Miami Gardens Drive, 2nd Floor North Miami Beach, Florida 33180</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	

14. I hereby certify that the information submitted with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this statement 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 from an attachment with an address.

SIGNATURE: **LOUIS A. SUPRASKI** 4-27-98 (305) 792-0060

CR2E034 (10/97)