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

CORPORATION ANNUAL REPORT

1998

を設定を受ける。 では、1915年には、1915年には、



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000097234 (4)

FFL INTERNATIONAL CORPORATION

FILED Apr 29 1998 8:00am Secretary of State



Principal Place	Of Business	Mailing Address					
	DRIVE APT. 307	1500 NW 128 DRIVE APT	. 307				
SUMPISE FL 3	(335)	SUNRISE FL 33351			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					12/02/1996		
	ace of Business	2a. Mading Address		— ·	4. FEI Number	A	pplied For
21 140	BONAVENTUREBLUR	26 140 BONAVER	utarie h	Blud	65-0713021	N	ot Applicable
Suite, Apr. #, etc.					5. Certificate of Status Desired		Additional
	1. 203	27 Apt. 203 City & State	<u> </u>		C. Continuation of States position	Fee A	equired
City & State	- I	L			6. Election Campaign Financing	_ `	May Be
23 W.	Weston 28 Weston				Trust Fund Contribution		
Zip 212 2	Gountry	7 ₁ p	Gountry	- ^	8. This corporation owes or has paid to		
24 3332	25 U. S. Α 9. Name and Address of Current	29 333 Z (o	30 化5	7 17	Personal Property Tax due June 30 10. Name and Address of New Regis	<u> </u>	2(10
DIA	_1	Togratoroo Agoin	81	Name	ID. Hanne and Address of their flogic	TOTOG Ago.ii	
DIAS, FABILO P. DIAS							
1500 NW 128 DRIVE APT. 307 SUNRISE FL 33351 82 Street A					ddress (P.O. Box Number is Not Acceptable) BONG VEN TURE Blud.		
. 300	ANIOE PE 33331		83	170	BONA VENTUTE D	100.	
	•			Ap.	1.203		
•			84	City	Jeston	FL 85 Zip	Code
11. Pursuant to	o the provisions of Sections 607 0502	and 607 1508, Etorida Stalut	es the above	named cor	rooration submits this statement for the pure	pose of changing i	326 its registered
office or re	egistered agent or both, in the State of	Florida Such change was a	authorized by	the corpora	rporation submits this statement for the purp ation's board of directors. I hereby accept the	ne appointment as	registered
	irraminar con-, and accept a boligan	Oris Dr. 380 Holl 607.0305, FIG	mua siatutes.		321	26198	-
SIGNATURE	Suppore, typed or punits mane of registered agents	Millo if applicable (NOT	E Registered Ager	i signature requ	uired when re-instaling)	26/98 DATE	,
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	RS IN 12
TITLE	D	DELETE	1.1 TiTL€	P) / c	Change	Addition
NAME	DIAS, FABIO P		1.2 NAME	F	Abio P. Di As		7
STREET ADDRESS	1500 NW 128 DRIVE APT. 307		1.3 STREET A	ADDRESS /	Abio P. Di As 40 BONAVENTURE Blue Nepton FL 333.	Apt. 203	ָן נוֹ
CITY-ST-ZIP	SUNRISE FL 33351		1.4 CITY-ST	- ZIP	Nepton FC 333.	۷6	
TITLE		☐ DELETE	2.1 TITLE		,	L Change	Addition C
NAME			2.2 NAME			•	1
STREET ADDRESS			2.3 STREET A	DDRESS			
CITY-ST-ZIP			2. 4 CITY-SI	-ZIP			
TITLE		[] DELETE	3.1 THLE	l		Change	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET A				ļ
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NAME			4. 2 NAME				
STREET ADDRESS			4.3 STHEET A				Į
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST 5.1 TITLE	- ZIP		Change	Addition
1				1		Criange	C Addition
NAME DESCRIPTION OF SECURITY			5.2 NAME	opproc			<u> </u>
STREET ADDRESS			5.3 STREET A				
CFTY-ST-ZIP TITLE		☐ DELETE	5.4 CITY - ST 6.1 TITLE	-ZIP		Change	Addition
		peter	6.2 NAME	1		Onunge	
NAME CONTROL			6.3 STREET A	inneren			•
STREET ADDRESS							
14. hereby ce	ertify that the information supplied with	this filing does not qualify for	6.4 CITY-ST or the exempti		n Section 119.07(3)(i), Florida Statutes. I fur	ther certify that the	information

Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119,07(3)(i), Florida Statutes. If 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 our an attrachment with an address.

CIGNATURE:

07/20/08