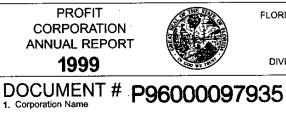
## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



PRINCE INVESTMENT CORPORATION OF AMERICA, INC.

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90124 046 \*\*\*150.00

## 

Principal Place of Business Mailing Address						4 14111 14E1E 1E1E	
1094 JEFFERY ST. BOCA RATON FL 33487 US		1094 JEFFERY ST BOCA RATON FL 33487 US			DO NOT WRITE IN TH	IS SPACE	
US		03			3. Date Incorporated or Qualifed		~
	•				12/04/1996		}
Principal Place of Business     2a. Mailing Address					4. FEI Number	A	pplied For
21 26					65-0710353	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				·	5. Certifcate of Status Desired		Additional lequired
City & State	Э	City & State	28		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees		
Zip	Country Zip Co		Country	0. 1110 55.151.1111		<b></b>	
24 25 29 30				Personal Property Tax. Yes No			
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registere	d Agent	
A44E	DI AMOUTO CHARTERED		81	Name			
AMERILAWYER CHARTERED			82	Street Add	dress (P.O. Box Number is Not Acceptable)		
343 ALMERIA AVENUE CORAL-GABLES FL 33134							
COR	AL'GABLES FL 33134		83	<b>'</b>			
			84	City		85 Zip	Code
					F		e registered
office or re	egistered agent, or both, in the State	e of Florida. Such change was authouting statutes, the of Florida. Such change was authous of, Section 607.0505, Florida	orized by	/ tne comora	rporation submits this statement for the purpose tion's board of directors. I hereby accept the app	ointment as re	egistered
SIGNATURE							
	Signature, typed or printed name of registered ag	-		ent signature requi	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECT	OPS IN 12
12.		ND DIRECTORS	13.	T	ADDITIONS/CHANGES TO OFFICERS/	Change	
TITLE	PTD VEDTUN CENE		1.2 NAME			_ •	
NAME	VERTKIN, GENE			T ADDRESS			ŀ
STREET ADDRESS	23492 MIRABELLA CIR						
CITY-ST-ZIP	BOCA RATON FL	□ DELETE	1.4 CITY-1	SI-ZIP		☐ Change	{☐ Addition
TILE .	VSD		2.2 NAME				
NAME	SALADZIUS, ARTURAS			ET ADDRESS			
STREET ADDRESS	1094. JEFFERY ST		2. 4 CITY-				
CITY-ST-ZIP TITLE	BOCA RATON FL	☐ DELETE	3.1 TITLE	31-21		Change	☐ Addition
NAME .			3.2 NAME				
Į.				ET ADDRESS			ļ
STREET ADDRESS			3.4. CITY-				
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	ET ADORESS			
CITY-ST-ZIP			4.4 CITY-				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				İ
STREET ADDRESS			6.3 STREI	ET ADDRESS			

CITY- ST-ZIP 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 or attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: