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Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90003 003 ***158.75



| PROFIT CORPORATION ANNUAL REPORT 1999 | | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS | |
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| DOCUMENT # P97000007679 | | | |
| 1. Corporation Name SUPPO INTERNATIONAL, INC. | | | |
| Principal Place of Business 7040 W PALMETTO PARK ROAD SUITE 552 BOCA RATON FL 33433 | | Mailing Address 7900 N. UNIVERSITY DR SUITE #201 TAMARAC FL 33321-2126 | |
| 2. Principal Place of Business | | 2a. Mailing Address | |
| 21. Suite, Apt. #, etc. | | 26. Suite, Apt. #, etc. | |
| 22. City & State | | 27. City & State | |
| 23. Zip Country | | 28. Zip Country | |
| 24. Zip | | 29. Zip | |
| 25. Country | | 30. Country | |
| 9. Name and Address of Current Registered Agent | | 10. Name and Address of New Registered Agent | |
| BLUM & BLUM 7900 N. UNIVERSITY DRIVE SUITE #201 TAMARAC FL 33321-2126 | | 81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City FL 85. Zip Code | |
| 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | |
| 12. OFFICERS AND DIRECTORS | | | |
| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | |
| 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | | | |
| 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | | | |
| 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | | | |
| 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | | | |
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| 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | | | |
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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, with all other like empowered.

SIGNATURE: Martin J. Suppo 2-14-99 581-991-6559
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)