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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

1	JAL REPORT 1998	Secretary of State DIVISION OF CORPORATIONS					Secretary of State				
DOCU 1. Corporatio	MENT # P9700	0014260 (8)		_			4 6				
CVIBL,	•	• •				* 1	S - 1 - 1				
				_,.							
Principal Plac	e of Business	Mailing Address				1 (03)(03)	10 10 111 10011 66 111 00111 1	1866 8 B181 118	II BIBIA HALA BE	ili 40 11 1981	
9000 S.W. 152ND STREET 9000 S.W. 152ND STREET											
SUITE 102 MIAMI FL 331:	57	SUITE 102 MIAMI FL 33157				DO NOT WRE	FE IN THIS	SPACE			
						3. Date Incor	porated or Qualified	i			
9 Principal P	lace of Business	2a. Mailing Address				02/13/19 4. FEI Number			\	nation For	
21 21	INCO OF DUSINESS	26. Mailing Address				4. FELIVOIDA	<i>31</i>		/ 	pplied For ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5.0.15	10:11			Additional	
22		27				5. Certificate	of Status Desired		Fee R	equired	
City & Stat	6	City & State					ampaign Financing Contribution			May Be to Fees	
Zip	Country	2 ip	Cour	ntry		8. This corpo	ration owes or has p	paid the cu	rrent year In	tangible	
24	25		30				roperty Tax due Jur			_] No	
	9. Name and Address of Curre	ent Registered Agent		81	Name	10, Name and	Address of New F	registered	Agent		
BROWN, B. MACKAY 9000 S.W. 152ND STREET				_							
		82 Street Addre			ldress (P.O. Box Nu	mber is Not Accept	able)				
SUITE 102 MIAMI FL 33157			Ī	83				-			
mirani i E 00 ioi				84	City				85 Zip	Code	
								FL	<u> </u>		
Office OF F	to the provisions of Sections 607.05 egistered agent, or both, in the Starm familiar with, and accept the obli	te of Florida. Such chango was a	uithorized	lbυ	the cornor	orporation submits fr ration's board of dire	his statement for the actors. I hereby acc	purpose of the ap	of changing i pointment as	ts registered registered	
SIGNATURE	Signature, typed or printed name of registered a	agent and title II applicable. (NOTE	: Registered	Ago	nt signaturo rec	quired when reinstating)		DATE			
12.		ND DIRECTORS	13.	_		ADDITIONS	CHANGES TO OFF				
TITLE	0	DELETE	1.5 TITU	LE		Via Pres,	Sery /Tr	easi	Change	Addition	
NAME	BOGATAJ, LUDVIK		1.2 NAM			1	- ,			,	
STREET ADDRESS	KIDRICEVA 1, 8210 TREBNJI	E	1		ADDRESS						
CITY-ST-ZIP TITLE	SLOVENIA D :	DELETE	1.4 CIT	_		Vice Pres	idont		Change	Addition	
NAME	BOGATAJ, MARIJA			2.2 NAME		orce ryes	1 War		unange	A	
STREET ADDRESS	KIDRICEVA 1, 8210 TREBNJI	E			ADDRESS						
CITY-ST-ZIP	SLOVENIA 2.		2. 4 CIT	TY - Ş							
TITLE	D	DELETE	3.1 TITU		_	resident	_		Change	Addition	
NAME	BOGATAJ, DAVID	.	3.2 NAM							•	
STREET ADDRESS	KIDRICEVA 1, 8210 TREBNJI	E			ADDRESS						
CITY-ST-ZIP	SLOVENIA	DELETE	3.4. CIT 4.1 TITL	_	ot-ZIP				Change	Addition	
NAME		—*	4. 2 NA								
STREET ADDRESS	4				ADDRESS						
CITY-ST-ZIP			4.4 CITY	Y - S1	T-ZIP						
TITLE		DELETE	5.1 TITL						☐ Change	Addition	
NAME			5.2 NAM								
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY 6.1 TITL		1 - ZIP	<u></u>			Change	Addition	
NAME			6.2 NAM)					' '	
STREET ADDRESS					ADDRESS						
l											

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 chapted, or on an attachment with an address.

FILED

Jan 23 1998 8:00am