Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90088 008 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000015670

1. Corporation Name

PERRIER PRODUCTS INT'L, INC.

}			-					
Principal Place of Business Mailing Address								
15601 SW 137 AVE. SUITE #42 15601 SW 137 AVE. SUITE #42			2		1			
MIAMI FL 33177 MIAMI FL 33177_				وعوث مصحه	DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					02/14/1997			
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number 45-08385	3 Apr	plied For	
21	·	26			4. FEI Number APPLIED FOR 65-08285.	Not	t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A		
22		27			3. Continue of Citation Desired	Fee Re	quired	
City & State	e	City & State			6. Election Campaign Financing	\$5.00		
23	·	28			Trust Fund Contribution	Added to	o Fees	
Zíp			Country	/	8. This corporation owes the current year In			
24					Personal Property Tax. Yes No 10. Name and Address of New Registered Agent			
9 Name and Address of Current Registered Agent				Name	10. Name and Address of New Registered	Agent		
PERF	RIER, FRANZ M		81	Italiie				
15601 SW 137 AVE, SUITE #42 MIAMI FL 33177				Street Addr	Street Address (P.O. Box Number is Not Acceptable)			
				83				
			03					
				City	Fi	85 Zip C	ode	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes,	the abov	e-named corp	oration's ubmits this statement for the purpose o	I changing its	registered	
office or n	egistered agent, or both, in the State m familiar with and accept the obliga	of Florida. Such change was authoritions of, Section 607.0505, Florida	orized by Statūte:	tne corporations.	on's board of directors. I hereby accept the appo		yistereu .	
SIGNATURE	Chan HA	FRANZ PERRIER			4/06	1/99.		
3.8				red Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12.	OFFICERS AND DIRECTORS 13. PSTD DELETE 1.1TI		13.		ADDITIONS/CHANGES TO OFFICERS A	☐ Change	Addition	
l , i	PERRIER, FRANZ M	- Derrie	1.2 NAME					
NAME ;	15601 SW 137 AVE, SUITE #42	·	ì	TADORESS	<u>.</u>			
STREET ADDRESS	ANALU EL COLTE							
CITY-ST-ZIP TITLE			1.4 CITY-5 2.1 TITLE	51-ZIP		Change	Addition	
NAME	,		2.2 NAME				_	
STREET ADDRESS				T ADDRESS				
}	•		2.4 CITY-		·			
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE	31-21		Change	Addition	
NAME			3.2 NAME		•		_	
STREET ADDRESS				TADORESS				
CITY-ST-ZIP			3.4. CITY-:				ľ	
TITLE		☐ DELETE	4.1 TITLE	01-22		Change	Addition	
NAME			4:2 NAME	. 1	والشعيرة أأعاش فينتيب المسيني أدور أينت أرزر		, - .	
STREET ADDRESS	المعارية سحاسرا		,	T ADDRESS	<u> </u>			
CITY-ST-ZIP	1		4.4 CITY-S					
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition	
NAME			5.2 NAME				·	

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 on an attrictment with an address with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

 $\boldsymbol{\mathsf{TILE}}$

NAME

QUIRED

Change

Addition