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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 P9700025938

FILED Mar 27 1998 8:00am Secretary of State

1. Corporatio	n Name	# P9700 TERNATIONAL CO			• •								
Principal Place of Business				Mailing Address						i iddiidas iin paris iddii odiis odi	ia Briah Milain I	1981 SIRRO (BIRD (I	IES LON IEGN
584 INTERNATIONAL PLACE ROCKLEDGE FL 32955				564 INTERNATIONAL PLACE ROCKLEDGE FL 32955									
***************************************				11001122	702 12 020 00					DO NOT WE	ITE IN THIS	SPACE	
										3. Date Incorporated or Qualific	d		
2. Principal P	lace of Busin	ness	2	2a. Mailing Address						03/11/1997 4. FElytember 0 / 0		Tăn	plied For
21				26						64-34314	Ω		t Applicable
Suite, Apt. #, etc				Suite, Apt. #, etc.						5. Certificate of Status Desired		\$8.75	
22				27						6. Certificate of Status Desired		Fee Re	pquired
City & Stat	e		-	City & State						6. Election Campaign Financing	_	\$5.00	
23			28	28						Trust Fund Contribution		Added t	
Zip	Country			ı			Country			8. This corporation owes or has	•		
24	o Name	25 and Address of Curre		29 30 30 Segistered Agent					1	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
ED				1010101	9-/···		81	Name		10. 114111			
FRESE, GARY B 930 S HARBOR CITY BLYD						ļ					 		
SUITE 505						-	82 Street Add			s (P.O. Box Number is Not Accep	itable)		1
MELBOURNE FL 32901						ŀ	83						
INL	LOCOL II IL	1 0 0 0 0 1				1				· · · · · · · · · · · · · · · · · · ·			
							84	City			F	85 Zip (Code
11. Pursuant office or ragont. La	to the provis egistered ag m familiar w	ions of Sections 607.05 gent, or both, in the Stat ith, and accept the obli	02 and e of Flo gations	607.1508 rida. Such of, Sectio	, Florida Statut n change was a n 607,0505, Flo	es, the ab authorized orida Statu	ove by	named the corp	corpor	ation submits this statement for the statement of the state of directors. I hereby ac	e purpose cept the ap	of changing its pointment as	s registered registered
SIGNATURE		·	-										
40	Signature, typer	or printed name of registored a OFFICERS A			le (NOT		Age	nt signature	peruper e	when reinstating)	DATE	ום מוחדים	0.15140
12.	D	OFFICE HS A	ND DIRE	CTORS	DELETE	13.	F		Τ	ADDITIONS/CHANGES TO OF	FICERS AF	Change	Addition
NAME						1.2 NAI							
STREET ADDRESS 8555 ASTRONAUT BLVD						1.3 STREET ADDRESS							
CITY-ST-ZIP CAPE CANAVERAL FL 32920						1.4 CITY - ST - ZII							
TITLE						2.1 1(1	,				☐ Change	Addition	
NAME				2.21			2.2 NAME			•			
STREET ADDRESS				2.3 \$			2.3 STREET ADDRESS				1/3		
CITY-ST-ZIP						2.4 CI	Y - S	T-ZIP					
TITLE					DELETE	3.1 TIT	LE	7				☐ Change	Addition
NAME						3.2 NA	ME						
STREET ADDRESS						3.3 STF	EET	ADDRESS					
CITY-ST-ZIP					OCI CTC	3.4. CIT		T-ZIP			··· -	- Observed	1 4 4 4 1 1 2 -
TITLE					DELETE	4.1 TIT		1	}			Change	☐ Addition
NAME						4.2 NA							
STREET ADDRESS								ADORESS					
CITY-ST-ZIP TITLE					DELETE	4.4 CIT 5.1 TIT		1-ZIP	-	· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME						5.1 III		-	1			— Sumite	
STREET ADDRESS								ADDRESS					
CITY-ST-ZIP						5.4 CIT							ļ
TITLE	 -				DELETE	6.1 111					***************************************	Change	☐ Addition
								ļ	J				
NAME						6.2 NA	Æ	I					•
STREET ADDRESS								address					

14. I hereby certify that the information supplied with this filling 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 frustee 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.

CICLIATURE

3/23/913 (407/1/3/5/91