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 # **P97000028457**1. Corporation Name

DESTINY INTERNATIONAL INVESTMENTS, INC.

Principal Place of Business Mailing Address						
780 NW LEJEUNNE ROAD 780 NW LEJEUNNE ROAD						·
STE 618 STE 618						
MIAMI FL 33126 MIAMI FL 33126						DO NOT WRITE IN THIS SPACE
US		US				3. Date Incorporated or Qualifed
	•	Da Marillan Ada				03/28/1997 4. FEI Number Applied For
⊢	lace of Business	2a. Mailing Add	liess			4. FEI Number Applied For Not Applicable
Suite, Apt.	# atc	26 Suite, Apt. #	# etc			\$8.75 Additional
22	#, GtC.	27	, 0.0.			5. Certificate of Status Desired Fee Required
City & Stat	e	City & State	· · · · · · · · · · · · · · · · · · ·			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		Country		8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Curre					10. Name and Address of New Registered Agent
A134				81	Name	
	ARADO, ERNESTO E			82	Street	Address (P.O. Box Number is Not Acceptable)
	NW LEJEUNNE ROAD					2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
STE	MI FL 33126			83		
MUN	WI FL 33126			84	City	85 Zip Code
	and the second s	grave to the same				· FL S Zp Good
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 a	m familiar with, and accept the oblig	ations of, Section 607	.0505, Florida S	Statutes		, , , , ,
SIGNATURE		-				
42	Signature, typed or printed name of registered at	gent and title if applicable. AND DIRECTORS		ered Ager 13.	it signature r	equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	P			.1 TITLE		Change Addition
NAME	LOPEZ, JOSE E			.2 NAME		
STREET ADDRESS	780 NW LEJEUNNE RD, STE	618			ADDRESS	
CITY-ST-ZIP	MIAMI FL 33126	0.0		.4 CITY-S		
TITLE	ST			1 TITLE	1-211	☐ Change ☐ Addition
NAME	ALVARADO, ERNESTO E		2	2 NAME		
STREET ADDRESS	780 NW LEJEUNNE RD, STE	618	2	.3 STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33126	,		. 4 CITY- S		
TITLE		· □ ſ		.1 TITLE	-	☐ Change ☐ Addition
NAME			3	.2 NAME		
STREET ADDRESS			3	.3 STREET	ADDRESS	
CITY-ST-ZIP	劉氏 2017年 - 1917年 -		3	.4. CITY-S	T-ZIP	
TITLE] [DELETE 4	.1 TITLE		☐ Change ☐ Addition
NAME			4	2 NAME		•
STREET ADDRESS		V	4	.3 STREET	ADDRESS	
CITY-ST-ZIP		·	4	.4 CITY-S	T-ZIP	
TITLE			DELETE 5	.1 TITLE		☐ Change ☐ Addition
NAME	,			.2 NAME		
STREET ADDRESS	r		5	.3 STREET	ADDRESS	
CITY-ST-ZIP				4 CITY-S	T-ZIP	•
TITLE	The same of the	.,		.1 TITLE		☐ Change ☐ Addition
NAME '	make a	÷ •		.2 NAME		_
STREET ADDRESS	Phone .		6	3 STREET	ADDRESS	·

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 trusted emowered 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 appear address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE

FILED

Jan 23, 1999 8:00am

Secretary of State

01-23-1999 90044 041 ***150.00