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

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Morthan

Sandra B. Mortiegra Secretary of State

1998

DIVISION OF CORPORATIONS

DOCUMENT # P97000030238 (4)

## FILED Feb 23 1998 8:00am Secretary of State

1. Corporatio		000200 (4)		
GIFTS	INTERNATIONAL INC.			
				1 1821 1811 1811 1811 1811 1811 1811 18
Principal Plac	e of Rusiness	Mailing Address		
'		•		
22800 S.W. 56TH AVENUE 22800 S.W. 56TH AVENUE BOCA RATON FL 33433 BOCA RATON FL 33433				
) Doon tinion	112 00103	DOOR HATON 12 SOUR		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
<u> </u>				04/02/1997
	lace of Business Y SANDALFOOT PLAZA DR	2a. Mailing Address		4. FEI Number Applied For
21 2 308 Suite, Apt.		Suite, Apt. #, etc.		65 0746 452 Not Applice
22 BOCA		27		5. Certificate of Status Desired Fee Required
City & State	9	City & State		6. Election Campaign Financing \$5.00 May 8e
23 334		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25 W.P. BEACH		30	Personal Property Tex due June 30.  Yes No
	g. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent
1	AA'NON-SCHNABEL, SONNY		B1 Name	•
			Idress (P.O. Box Number is Not Acceptable)	
j BO	CA RATON FL 33433		83	
			63	
			84 City	FL 85 Zip Code
44 Purculant	to the provisions of Sections 607 0502	and 607 1508 Florida Statuta	s the above named on	progration submits this statement for the purpose of changing its register
office or r	egistered agent, or both, in the State of	f Florida. Such change was au	ithorized by the corpori	ration's board of directors. I hereby accept the appointment as registere
1	m familiar with, and accept the obligati	ons of, Section 607.0505, Flor	ida Statutes.	
SIGNATURE	Signature, typed or printed name of registered agent	and little if applicable (NOTE:	Registered Agent signature req	puired when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		☐ DELETE	1.1 TITLE	president Change Addi
NAME			1.2 NAME	SONNY SHAANON-SCHNABEL 2800 SW 56 AVE
STREET ADDRESS			1.3 STREET ADDRESS 2	2800,8M26 4NE
CITY-ST-ZIP				BOCA PATON FL 33433
TITLE		☐ DELETE	2.1 TITLE	Change Addi
NAME			2.2 NAME	•
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	2.4 CITY-ST-ZIP	Change Addi
TITLE		☐ DETEIE	3.1 TITLE	
NAME STREET ANNDESS			3.2 NAME 3.3 STREET ADDRESS	
STREET ADDRESS			3.4 CITY-ST-ZIP	
CITY+ST-ZIP TITLE		DELETE	4.1 TITLE	Change Addi
NAME		<u></u>	4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addi
NAME		_	5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	61 TITLE	☐ Change ☐ Addi
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	
14. I hereby o	ertify that the information supplied with	this filing does not qualify for	the exemption stated in	in Section 119.07(3)(i), Florida Statutes. I further certify that the informati

14. Thereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.01(3)(f), 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.

SIGNATURE:

1 10 mil

PRESIDEAUT

1-16-98 561-983-058