SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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23

24

Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000047231 (0)

Country

9. Name and Address of Current Registered Agent

25

M.O.R. INTERNATIONAL, INC.

Principal Place of Business Mailing Address 8803 NORTHWEST 29 STREET 8803 NORTHWEST 23 STREET MIAMI FL 33172 MIAMI FL 33172

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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FILED Jul 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

10. Name and Address of New Registered Agent

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

LS- 075 6439

05/29/1997

4. FEI Number

AMERILAWYER CHARTERED 343 ALMERIA AVENUE CORAL GABLES FL 33134			81 82 83	Street	Address (P.O. Box Number is Not Acceptable)	
			84	<u> </u>	FL 65 Zip Code	
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 am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered agent and title if applic	able. (NOTE	Registered A	usangla Inega	re required when reinstating) DATE	
12.	OFFICERS AND DIRECTOR		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	9
TITLE	PSD	DELETE	1.1 TITLE		Change Addition	į
NAME	RUBIO, RICARDO E		1,2 NAME			7
STREET ADDRESS	8803 NORTHWEST 23 STREET		1.3 STREET	ADDRESS		í
CITY-ST-ZIP	MIAM FL 33172		1.4 CITY-ST			i
TITLE	VID	DELETE	2.1 TITLE		Change Addition	(
NAME	BARRIOS, MARCEL	0222.12	2.2 NAME		Cribing Addition	
STREET ADDRESS	8803 NORTHWEST 23 STREET		2.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33172		2.4 CITY-ST			
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME		223 0102.12	3.2 NAME			
STREET ADORESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST	-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST	-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		_ , _	
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST	-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS	•		6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST	-ZIP		
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 ennual report or supplemental ennual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am						

Country

R1 Name

30

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.

X Mark Bain

7/14/98