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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 # P97000048484

1. Corporation Name

S.G.I. INTERNATIONAL, INC.										
Principal Place	of Rusines	· e		M	lailing Address					U 18011081 118 (ditt 1891) dalti datil datil areni eteli eleki eleki esti este inet
1221 BRICKELL AVE STE 1060 MIAMI FL 33131					1221 BRICKELL AVE STE 1060 MIAMI FL 33131					DO NOT WRITE IN THIS SPACE
us US										3. Date Incorporated or Qualifed 06/03/1997
Principal Place of Business 21					2a. Mailing Address					4. FEI Number Applied For Not Applicable
Suite, Apt. #, etc.					Suite, Apt. #, etc.					5. Certifcate of Status Desired \$8.75 Additional Fee Required
City & State					City & State					6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip Country				28	Zip Co			Country		8. This corporation owes the current year Intangible
24		25		29		30				Personal Property Tax.
	9. Name	and Add	ress of Current	Regi	stered Agent		81	T	Name	10. Name and Address of New Registered Agent
LAW FIRM OF MANFRED ROSENOW PA							82	Street Address (P.O. Box Number is Not Acceptable)		
2425 CORAL WAY MIAMI FL 33145							83			
WILLIAM	M 1 E 00 1,1						84		City	p_ 85 Zip Code
									•	FL of the second
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 register 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.										poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered
SIGNATURE	*		me of registered agent						signature requir	red when reinstating) OATE
12.	Signature, types	a or printed na	OFFICERS AND			_	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSD		<u></u>		☐ DELETE	_	1.1 TITLE			☐ Change ☐ Addition
NAME	TALAMO	FNRIQI)F		•		1.2 NAME			
STREET ADDRESS	1		SLVD #1404				1.3 STREE	TΑ	ADDRESS	
CITY-ST-ZIP	BOCA R						1.4 CITY- S	T- 7	ZIP	
TITLE					☐ DELETE		2.1 TITLE			☐ Change ☐ Addition
NAME							2.2 NAME		1	
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CITY-ST-ZIP							2. 4 CITY-	ST-	ZIP	
TITLE					☐ DELETE	:	3.1 TITLE			☐ Change ☐ Addition
NAME	Į					- [:	3.2 NAME			
STREET ADDRESS]						3.3 STREE	TA	ADDRESS	
CITY-ST-ZIP							3.4. CITY-	ST-	-ZIP	
TITLE					☐ DELETE		4.1 TITLE			☐ Change ☐ Addition
NAME							4. 2 NAME			İ
STREET ADDRESS						l l	4.3 STREE	T.A	ADDRESS	
CITY-ST-ZIP						_#	4.4 CITY-S	ST-	ZIP	
TITLE					☐ DELETE		5.1 TITLE			☐ Change ☐ Addition
NAME							5.2 NAME	_		
STREET ADDRESS							5.3 STREE		- 1	
CITY-ST-ZIP	<u> </u>						5.4 CITY-5	ST-	ZIP	DAL. DALISS.
TITLE					☐ DELETE		6.1 TITLE			☐ Change ☐ Addition
NAME	I						6.2 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 attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: 7

STREET ADDRESS

CITY-ST-ZIP