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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS

CITY-ST-7IP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Jun 18 1998 8:00am

Secretary of State

DOCUMENT # P97000050977 (2)

D C INTERNATIONAL BUSINESS CORP.

Principal Place of Business Mailing Address 5030 CHAMPION BLVD.. # 6-249 5030 CHAMPION BLVD.. # 6-249 **BOCA RATON FL 33496 BOCA RATON FL 33496** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/09/1997 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 65.07.57121 Not Applicable 26 Suite, Apt. #, etc Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Žφ 2_{i0} Country Country 8. This corporation owes or has paid the current year intangible □No 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CARIA, DIRCEU 5030 CHAMPION BLVD., # 6-249 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33496** 83 84 City 85 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. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, typed or provest name of notice techniques and tilled approable OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELLIE Change 1.1 TITLE TITLE CARIA, DIRCEU NAME 1.2 NAME **CR2E034** 5030 CHAMPION BLVD., # 6-249 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33496** CITY-ST-7IF 1.4 CITY-SI-ZIP DELFTE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - S1 - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CHY-ST-ZIP DILEIL Change Addition TATLE 4.1 TILLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-S1-ZIP CITY-ST-ZIP DELETE TITLE 5 1 1/1LF Change Addition 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5 4 CITY - ST - 7IP CITY-ST-ZIP 10000255505fange DELETE 61000 Addition TITLE

14. Thereby 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 equival report or supplies entail account report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an licmental armual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation Block 12 or Block 13 if changed, or an attachment with an address

6.2 NAME

63 STREET ADDRESS

6 4 CITY - ST - ZIP

~06/19/98---01101---020

***150.00

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We are Sending the checks for the annual report at this date because we just got the form. Thank your

PAG Z