

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

0258

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Apr 26, 1999 8:00 am**  
**Secretary of State**

04-26-1999 90171 001 \*\*\*150.00

DOCUMENT # P97000051345

1. Corporation Name

FIREX INTERNATIONAL INC.

Principal Place of Business

~~2086 SW 78 AVE~~  
~~MIAMI FL 33155~~

Mailing Address

~~2635 SW 78 AVE~~  
~~MIAMI FL 33155~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/10/1997

4. FEI Number

65-0786192

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year's Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 20824 SAN SIMEON WAY

Suite, Apt. #, etc.

#109

City & State

23 NORTH MIAMI BEACH FL

Zip

33179

Country

USA

2a. Mailing Address

26 20824 SAN SIMEON WAY

Suite, Apt. #, etc.

#109

City & State

28 NORTH MIAMI BEACH FL

Zip

33179

Country

USA

9. Name and Address of Current Registered Agent

GONZALEZ, VICENTE  
~~2635 SW 78 AVE~~  
~~MIAMI FL 33155~~

10. Name and Address of New Registered Agent

81 Name

GONZALEZ VICENTE

82

Street Address (P.O. Box Number is Not Acceptable)

83

20824 SAN SIMEON WAY #109

84

CITY NORTH MIAMI BEACH FL

85

Zip Code

33179

11. Pursuant to the provisions of Sections 607.0501 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 applicable

(NOT E: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

VS

NAME

GONZALEZ, VICENTE

STREET ADDRESS

~~2635 SW 78 AVE~~

CITY-ST-ZIP

~~MIAMI FL 33155~~

TITLE

PT

NAME

RODRIGUEZ, MARIA Y

STREET ADDRESS

~~2635 SW 78 AVE~~

CITY-ST-ZIP

~~MIAMI FL 33155~~

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

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