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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000053903 (5)

INTERNATIONAL REPRESENTATION OF UNIVERSITIES INS

FILED Apr 24 1998 8:00am Secretary of State

TITUTE CORP.							
Principal Place of Business		Mailing Address			- I TODINEDI NIO IDIN IBENI OENI GOEN EN	YHU OGURU BUKSO SHIID IOUN	88188
10820 SW 136 COURT MIAMI FL 33186		10820 SW 136 COURT MIAMI FL 33186					
					DO NOT WRITE	E IN THIS SPACE	
					3. Date Incorporated or Qualified		
9 Principal Place of Pusi	0000	I AL MARKE KARITA			06/18/1997		
2. Principal Place of Business		2a. Mailing Address			4, FEI Number 65-0766528		Applied For
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			62 0 100 328	60.7	Not Applicable
22		27		5. Certificate of Status Desired		5 Additional Required	
City & State		City & State		Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees	
Zip 24	Country	Zip	Zip Country		8. This corporation owes or has paid the current year Intangible		
24 25 29		29 Secietared Agent	Stored Agent		Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 10. Name							
	EDO GUTIERREZ ADRIAN	NZEN	<u> </u>	INGI III			
10820 SW 136 COURT				Street Addr	ess (P.O. Box Number is Not Acceptal	ble)	
MIAMI FL 33186							
'			84	City		FL 85 Z	ip 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 regist office or registered agont, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registed							n its registered
office or registered ag	ont, or both, in the State of ith, and accept the obligation	Florida Such change was	authorized by	the corporati	ion's board of directors. I hereby acce	pt the appointment	as registered
SIGNATURE	in, and abbeta the disignife	5110 61, 30000011 601 50303, 1	ionoa siaiules	•			
	or printed name of registered agent a	nd title if apphrable (NC	TE: Registered Age	nt signature require	ed when reinstating)	DATE	
12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT	ORS IN 12
TITLE D		☐ DELET e	1.1 TITLE			☐ Chang	ge Addition
NAME JORGE ALFREDO GUTIERREZ		ADRIANZEN	1.2 NAME				l;
STREET ADDRESS 10820 SW 136 COURT			1.3 STREET ADDRESS				
CITY-ST-ZIP MIAMI FL 33186			1.4 CITY-ST-ZIP				8
TITLE		☐ DELETE	2.1 TITLE	-		L. Chang	je 🛄 Addition 🤇
NAME			2.2 NAME	l			
STREET ADDRESS			2.3 STREET	· · · · ·			
CITY-ST-ZIP		DELETE	2. 4 CITY - S	T- ZIP			
TITLE		ר"ו הנדכונ	3.1 TITLE			Chang	e L Addition
NAME STREET ADDRESS			3.2 NAME	I DODECOO			1
			3.3 STREET				i
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - S 4.1 TITLE	1- ZIP		Chang	e Addition
NAME		C DELETE	4. 2 NAME			L) Cliarly	le [_] Adultion
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY- ST				
TITLE		DELETE	5.1 TITLE	-211		Change	e Addition
NAME		band	5.2 NAME				, LJ Addition
STREET ADDRESS			5.3 STREET	ANDRESS			
CITY-ST-ZIP			5.4 City - St				
TITLE		DELETE	6.1 TITLE	E-11		Change	e Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST	- 1			1

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 attacking with an address.