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

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JUAN TEPHANDEZ

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B, Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000059081 (4) F.H. INTERNATIONAL SERVICES, INC. Principal Place of Business Mailing Address 11150 4TH STREET NORTH 11150 4TH STREET NORTH #3707 DO NOT WRITE IN THIS SPACE ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716 3. Date Incorporated or Qualified 07/07/1997 Applied For 2, Principal Place of Business 2a. Mailing Address 4. FEI Number 59-3460620 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country 2ϕ Country 8. This corporation owes or has paid the current year Intangible Yes [] No Personal Property Tax due June 30. 24 25 29 30 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Namo FERNANDEZ, JUAN R 11150 4TH STREET NORTH 82 Street Address (P.O. Box Number is Not Acceptable) #3707 83 ST. PETERSBURG FL 33716 84 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, typics or prints it have not reperfered appired and little it appells able (NOT) Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELFTE Change noifibbA ... ñ TITLE 1.1 TITLE FERNANDEZ, JUAN R NAME 1.2 NAME 11150 4TH STREET NORTH, #3707 STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 33716 1.4 CITY - ST - 7IP CITY-ST-ZIP Change DELETE 2.1 TITLE Addition TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CHY-S1-ZIP DELETE Change Addition TITLE 3.1 THUE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS City-ST-ZIP 4.4 CITY - S1 - ZIP DELLIE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STHEET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 BILLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - \$1 - ZIP CITY-ST-ZIP 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 annual report of supplience tal annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer or director of the corporation or the receiver or frusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporate Block 12 or Block 13 if changed. on an attachment with an address

05/27/98

(813) 579.3628