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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P97000074832

1. Corporation Name

ADMIRAL INT'L CORP.

Principal Place of Business	
5101 N.W. 21ST AVENUE SUITE 141 FT LAUDERDALE FL 33309	

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Principal Place	e of Business	Mailing Address						
5101 N.W. 21S	T AVENUE	2851 NE. 183RD ST						
SUITE 141	E EL 22200	SUITE 707E			DO NOT WRITE IN TH	IS SPACE		
FT LAUDERDALE FL 33309 AVENTURA FL 33309 US				3. Date Incorporated or Qualifed			1	
					08/28/1997			, <u>.</u> .
2. Principal P	lace of Business	- 2a. Mailing Address -	10	3 st.	4. FEI Number	⊢	plied For	
21		26 2851 NE	<u>٥٠ د ر</u>	<u> </u>	65-1108422		t Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 / Fee Re		İ
City & Stat	e	City & State			6. Election Campaign Financing	\$5.00	May Re	1
23		28 AVENTUR	2A <u> </u>	16	Trust Fund Contribution	Added	•	
Zip	Country	Zip	Cour		8. This corporation owes the current year			
24	25	29 33160	30	154	Personal Property Tax.	Yes	□No	1
	9. Name and Address of Curren	t Registered Agent		·••	10. Name and Address of New Registers	ed Agent		1
TAL	IBLIDY JANICE C		Ì	81 Name				
	IBURY, JANICE C 1 N.W. 21ST AVENUE		Ì	82 Street Addr	ress (P.O. Box Number is Not Acceptable)			
	E 141		}	83	· · · · · · · · · · · · · · · · · · ·			ł
	AUDERDALE FL 33309			03				
			ļ	84 City	F	L 85 Zip	Code	
office or r	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was tions of, Section 607.0505, F	authorized Iorida Statu	by the corporation tes.	poration submits this statement for the purpose on's board of directors. I hereby accept the app	cointment as re	gistered	j
	Signature, typed or printed name of registered ager			Agent signature require	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	DC IN 12	8
12.	P OFFICERS AN	ID DIRECTORS	13.	E T	ADDITIONS/CHANGES TO OFFICERS	Change	Addition	1 3
TITLE	TAMBURY, JANICE C.		1.2 NA	i				~
NAME		75		REET ADDRESS				3
STREET ADDRESS	AVENTURA FL 33360	/ L _						1 Ц
CITY-ST-ZIP		_			*			ַ כַ
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STREET ADORESS	M TAMBURY, FABIANO C. 2851 NE 183 ST, SUITE 707E		1.4 CIT 2.1 TITI 2.2 NAI 2.3 STI	Y-ST-ZIP LE . ME REET ADDRESS		Change	☐ Addition	נפט
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CITY-ST-ZIP TITLE NAME	M TAMBURY, FABIANO C. 2851 NE 183 ST, SUITE 707E	☐ DELETE	1.4 CIT 2.1 TITI 2.2 NAI 2.3 STI 2.4 CIT 3.1 TIT 3.2 NAI	Y-ST-ZIP E ME REET ADDRESS IY-ST-ZIP LE ME				ַבְּבָּבְיבָּבְיבָּבְיבָּבְיבָבְיבָבְיבָב
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CITY-ST-ZIP TITLE NAME	M TAMBURY, FABIANO C. 2851 NE 183 ST, SUITE 707E	☐ DELETE	1.4 CIT 2.1 TITI 2.2 NAI 2.3 STF 2.4 CIT 3.1 TIT 3.2 NAI 3.3 STF	Y-ST-ZIP E REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP				
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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 or a attachment with an address, with all other like empowered.