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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1998 DOCUMENT # P9700076952 (5)

SCIETECH INTERNATIONAL CORPORATION

## FILED Mar 10 1998 8:00am Secretary of State

Principal Place 7575 W FLAC SUITE 204 MIAMI FL 331	GLER ST	Mailing Address 7575 W FLAGLER S SUITE 204 MIAMI FL 33144	T		DO NOT WRITE IN THE	
					09/05/1997	
	lace of Business	2a, Mailing Address			4. FEI Number	Applied For
Suite, Apt	#. etc.	Suite, Apt. #, etc			65-0787683	Not Applicable \$8.75 Additional
22 27		l 1	- <del></del> 1		5. Certificate of Status Desired	Fee Required
City & State	е	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	1	8. This corporation owes or has paid the o	
24	25 9. Name and Address of Curre	29 Annt Registered Agent	30		Personal Property Tax due June 30.  10. Name and Address of New Registers	Yes No
P.C.	<del></del>	ur influencien whatir	B1	Name	to. Hanno and Addition of Hoth Hagistere	- ngviii
DE OLIVEIRA, JUAREZ F 7575 W FLAGLER ST SUITE 204			82		ress (P.O. Box Number is Not Acceptable)	, , , , , , , , , , , , , , , , , , , ,
	AMI FL 33144		83			
			تو ا	<u> </u>		In Code
			84		F	
office or r agent. I a SIGNATURE					poration submits this statement for the purpose tion's board of directors. I hereby accept the a	
40	Signature typed or printed name of registered as	peni and tille it applicable NO DIRECTORS	(NOTE Registered Age	ant signature requir	ADDITIONS/CHANGES TO OFFICERS A	
12.	DP OFFICERS AF	DELETE			ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	DE OLIVEIRA, JUAREZ F		1.2 NAME			_ , _
STREET ADDRESS	7575 W FLAGLER ST SUITE	204	1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33144		1.4 CITY-S	ST - 21P		
TITLE	DVT	DELETE	2.1 TITLE			Change Addition
NAME	DE OLIVEIRA, MARIA A		2.2 NAME			
STREET ADDRESS	7575 W FLAGLER ST SUITE	: 204	2.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33144	D DED EXE	2. 4 CITY-	ST-ZIP		Document Dates
TITLE		DELETE				Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STAEE1			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY -	31-247		Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY - ST - ZIP			4.4 CITY - 5			
TITLE		DELETE				Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP			5.4 CITY-5	ST-21P		
TITLE		DETETE	61 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 City - 9	iT-2iP		İ

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 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 an attachment with an address.

SIGNATURE: ×

Vieleveros

3111 111

PRES

3/3/98