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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME STREET ADDRESS

TITLE NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000081278 (8)

SIGNET INTERNATIONAL, INC.

OIGHE	i iittemational, iito					
Principal Plac	e of Business	Mailing Address				OL HERIN HÖDEL INAND INN ANDI
1111 KANE CONCOURSE 1111 KANE CONCOURSE SUITE 518			E			
	R ISLAND FL 33154	BAY HARBOR ISLAND F	BAY HARBOR ISLAND FL 33154		DO NOT WRITE IN THIS SPACE	
					<ol> <li>Date Incorporated or Qualified</li> <li>09/19/1997</li> </ol>	·
2. Principal P	ace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26			650787580	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	· ·		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State	<sub>1</sub>		6. Election Campaign Financing	<b>\$5.00</b> May Be
23	Country	<b>28</b>	Cour	de l	Trust Fund Contribution	Added to Fees
Zip	<del></del>	·		ıtry	8. This corporation owes or has paid the cur	rent year Intangible
24] .	25 9. Name and Address of Curre	29 ent Registered Agent	30		Personal Properly Tax due June 30.  10. Name and Address of New Registered.	
				91 Name		
				5.	ess (P.O. Box Number is Not Acceptable)  Con cons se, #	mol, the
343 ALMERIA AVENUE				32 Street Addr	ess (P.O. Box Number is Not Acceptable)	* /\ 0
CORAL GABLES FL 33134				33	ma conconsist, A	310
1			1			
				B4 City	expland Ise FL	
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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	1/2/2		03.	08.1	I I S	
				Agont signature requir		DIDECTOR IN 10
12.	PD OFFICERS A	NU DIRECTORS  DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
TITLE	• •		1.1 717			Change Change
NAME	GITMAN, YAKOV SS 1111 KANE CONCOURSE		1.2 NA			
DAY HADDOD IOLAND TI 00454				EE1 ADDRESS		
CITY-ST-ZIP			_	Y-ST-ZIP		Change Addition
TITLE	DT DELETE					Li Change Li Adolfion
NAME	BABCHIN, EUGENE CEO		2.2 NA	I		
STREET ADDRESS	1111 KANE CONCOURSE	0454		EE1 ADDRESS		
CITY-ST-ZIP				Y - ST - 7/P		Date:
TITLE			3.1 7(1	- 1		Change Addition
NAME	STOLYAROV, BORIS		3.2 NA			
STREET ADDRESS	1111 KANE CONCOURSE	0424		FET ADDRESS		
CITY-ST-ZIP	BAY HARBOR ISLAND FL 3			Y-ST-ZIP		
TITLE		T DELETE	4 5 10	F I		Change Addition

6.4.CITY-SI-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 is 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 attachment with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 City - ST- ZIP

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

611MLE

6.2 NAME

DELETE

DELETE

NONETHER X V 6-

03 00 1000

Change

Addition

**FILED** 

Apr 08 1998 8:00am

Secretary of State