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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 04 1998 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

P97000082408 (0)

SILHOUET	ITE INTERNATIONAL COF	RPORATION		
Brigging Black of	Business	Mailing Address		
Principal Place of Business		· ·		
8033 NW 41ST COURT B033 NW 41ST COURT SUNRISE FL 33351 SUNRISE FL 33351				
00000	•	00/#/102 12 00001		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				09/23/1997
2. Principal Place	of Business	2a, Mailing Address		4. FEI Number Applied For
21		26		Not Applicable
Suite, Apt. #, e	ite.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intancible
24	25), Name and Address of Current		30	Personal Property Tax due June 30. Yes WNo 10. Name and Address of New Registered Agent
		Lieflateien Wheiir	81 Nam	
MARGEL, EDITI M				
8033 NW 41ST COURT SUNRISE FL 33351			82 Stree	et Address (P.O. Box Number is Not Acceptable)
SUNH	SE FL 33351		83	
			33	
			84 City	85 Zip Code
dd D	isiana al Castiana COZ OF OC	and CO7 4500. Florida Chahda	- 15 - 25 - 21 - 2 - 2	FL o zp oods
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 tampent the obligations of, Section 607.0505, Florida Statutes.				
agent I am fa	* / / / / / / / / / / / / / / / / / / /		ida Statutes.	
SIGNATURE	Alure, typed or printed name of registered agen			ture required when reinstating) DATE
12.		DIRECTORS (NOTE:	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE /	A/2	DELETE	1,1 TITLE	Change Addition
NAME 2	WIF PAG	LGEL	1.2 NAME	and the light to t
STREET ADORESS	1077 NW 41	GT.	1.3 STREET ADDRES	s l
CITY-ST-ZIP	WARISE F	2. 23311	1.4 CITY-ST-ZIP	~
TITLE -	10	DELETE	2.1 TOLE	Change Addition
NAME	ED. TU LA	PANGEL	2 2 NAME	
STREET ADDRESS		65	23 STREET ADDRES	e l
CITY-ST-ZIP	SULKISE F	L 335V1	2.4 CITY-ST-ZIP	~
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRES	s
CITY-ST-ZIP			3.4. GITY-ST-ZIP	-
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRES	s
CITY-ST-ZIP			4.4 CITY-ST-ZIP	1
TITLE		DELETE	5.1 TITLE	Change Addition
NAME		_	5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 DITY-ST-ZIP	122 3/4/98
TITLE		DELETE	6.1 TITLE	€hange
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	-03/04/3801034005
S. C. P. DONEOS			0.0 Officer hounes	s ***150.00

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 own attachment with an address.

SIGNATURE: