SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

TOURSION OF CORPORATIONS

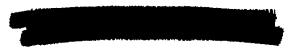
P97000101172 (9)

INTERNATIONAL, INC

Mailing Address

Sep 01 1998 8:00am Secretary of State

FILED



2801 S. BAYSHOHE DR., STE. 1215 MIAMI FL 33133		2601 S. BAYSHORE DR., STE. 1215 MIAMI FL 33133			
MICHIE FE 30100		MIRMI FL 33133			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 12/02/1997
2. Principal P	2a. Mailing Address	Address		4. FEI Number Applied For	
	5. BAYSHORE DR	26 2601 S. BAYSHUPE DR.		PE DR.	65-0798846 Not Applicable
Sulte, Apt. 22 50/7	#. etc. E_ /2/5	Suite, Apt. #, etc. 27 SV/TE 12/5			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
	DANT GROVE FL	28 COCONUT GROVE, FL			Trust Fund Contribution Added to Fees
Zip	Country Zip Cou		Countr		8. This corporation owes or has paid the current year intangible
24 331		11	0 >	4DE	Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent
SILVA, LÚIZ C				Name	
	I SOUTH BAYSHORE DR., STE. 12	215	62	Street Ad	dress (P.O. Box Number is Not Acceptable)
MAIM	MI FL 3 3133 🕛		_		
	•		83	}	
			84	City	FL 85 Zip Code
• • • • • • • • • • • • • • • • • • •					
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					
				Agent signature re	equired when reinstating) DATE
12. OFFICERS AND DIRECTORS 13.			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D		DELETE	DELETE 1.1 TITLE		Change Addition
NAME SILVA, LUIZ C			1.2 NAME		
STREET ADDRESS 2601 S. BAYSHORE DR., STE. 1215			1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33133		1.4 CITY-S	T-ZIP	
TITLE		DELETE	2.1 TITLE		Change Addition
NAME		2.2 NAME			
STREET ADDRESS			2.3 STREE	TADDRESS	
CITY-ST-ZIP	2.4 CI		2.4 CITY-S	T-ZIP	
TITLE		DELETE 3.1 TIT			Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET	TADDRESS	_
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE	becele		4.1 TITLE		Cbynge Addition
NAME			4.2 NAME		4/\ a/.
STREET ADDRESS			4.3 STREET ADDRESS		/// - /
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	
TITLE	DELETE 5.1 TI		5.1 TITLE		Change Addition
NAME			5.2 NAME		7000026308 37 °°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°°
STREET ADDRESS			5.3 STREET	ADDRESS	-U3/82/38U1UU5U 4 /
CITY-ST-ZIP			5.4 CITY-ST	r-zip	*** 5 50.00
TITLE	TLE DELETE		6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET	ADDRESS	İ
CITY-ST-ZIP			6.4 CITY-S1	r-zip	•

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 part an attachment with an address.

JY CC- 859-224V