PROFIT CORPORATION ANNUAL REPORT . 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90081 013 ***150.00

DOCUMENT # P98000017847

1. Corporation Name

DANMAX INTERNATIONAL CORPORATION

Principal Plac	e of Business	Mailing Address							
	EST 112TH STREET		12700 SOUTHWEST 112TH STREET MIAMI FL 33186						
MIAMI FL 3318	6	MIAMI FL 33186				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						02/24/1998			
Principal Place of Business 2a. Mailing Address						4. FEI Number	Ap	plied For	
21		26	Suite, Apt. #, etc.			65-0820099	No	t Applicable	
Suite, Apt.	#, etc.	⊢				5. Certificate of Status Desired \$8.75 Additional Fee Required			
22		27 City 8 Cycle						·	
City & Stat	e	City & State	<u> </u>			6. Election Campaign Financing Trust Fund Contribution S5.00 May Be Added to Fees			
Zip	Country			ountry		This corporation owes the current year Intangit	-	01663	
	25	29	30	,ounia y		Personal Property Tax.		□No	
24	9. Name and Address of Cura		30	\top		10 Name and Address of New Registered Ager	nt		
	5. Name and Address of Our		_	81	Name				
RICKARDS, VICTOR					Chart Add	ress (P.O. Box Number is Not Acceptable)			
12700 SOUTHWEST 112TH STREET				82	Street Addi	ress (P.O. Box Number is Not Acceptable)			
MIAI	VII FL 33186			83					
	w.			84	City	85	5 Zip C		
				07	City	FL "	′ ⁻ "`	,0 0 0	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Sta	tutes, the	e above	-named corp	poration submits this statement for the purpose of char	iging its	registered	
office or r	egistered agent, or both, in the Sta im familiar with, and accept the obl	te of Florida. Such change was	s authoriz	zed by	the corporation	ion's board of directors. I hereby accept the appointme	nt as re	gistered	
•	an lamilar with, and accopt the co.	ganono on occuent correcce,							
SIGNATURE	Signature, typed or printed name of registered	gent and title if applicable. (NO	OTE: Registe	ered Agen	t signature require	ed when reinstating) DATE			
12.	OFFICERS	AND DIRECTORS	1	3.		ADDITIONS/CHANGES TO OFFICERS AND DI			
TITLE	D	☐ DELETE	1.1	1 TITLE	.		Change	☐ Addition	
NAME	RICKARDS, VICTOR		1.3	2 NAME					
STREET ADDRESS	12700 SOUTHWEST 112TH	STREET	1.3	3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33186		1.4	4 CITY- S1	r-ZIP				
TITLE	٠	☐ DELETE	2.	1 TITLE			Change	Addition Addition	
NAME			2.5	2 NAME					
STREET ADDRESS			2.3	3 STREET	ADDRESS				
CITY-ST-ZIP			2.	4 CITY-S	T-ZIP				
TITLE		☐ DELETE	3.	1 TITLE			Change	Addition	
NAME			3.2	2 NAME				F :	
STREET ADDRESS	40 //m mag = 11.0		3.	3 STREET	ADDRESS	, · · · · · · · · · · · · · · · · · · ·	•	F ·	
CITY-ST-ZIP				4. CITY-5	T-ZIP		<u></u>		
TITLE		☐ DELETE	4.	1 TITLE			Change	☐ Addition	
NAME			4.	2 NAME	1				
STREET ADDRESS			4:	3 STREET	ADDRESS			,	
CITY-ST-ZIP	<u></u>		4.4	4 CITY-ST	r-ZIP		<u>:</u>		
TITLE		☐ DELETE		1 TITLE			Change	Additio	
NAME				2 NAME					
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				4 CITY-ST	i-ZiP				
TITLE		☐ DELETE	6.	1 TITLE			Change	Addition	

CITY-ST-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 on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

EQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OF DIRECTOR

CR2E034 (11/98)