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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P98000032051**1. Corporation Name

INTERNATIONAL INVESTMENT & FINANCIAL GROUP, INC.

## **FILED** Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90024 018 \*\*\*150.00



Principal Place of Business Mailing Address						
2455 E SUNRISE BLVD. SUITE 618 2455 E SUNRISE BLVD. SUI FT LAUDERDALE FL 33304 FT LAUDERDALE FL 33304				E 618		DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						04/06/1998
2 Principal P	lace of Business	2a, Mailing	Address	·		4. FEI Number Applied For
21		26				65-0830911 Not Applicable
Suite, Apt.	#, etc.		pt. #, etc.			\$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & Stat	e	City & S	State			6. Election Campaign Financing S5.00 May Be
23		28		_		Trust Fund Contribution Added to Fees
Zíp	Country	Zip		Country		8. This corporation owes the current year Intangible
24	25	29	30	) 		Personal Property Tax.   ☐ Yes ☐ No
	9. Name and Address of Curre	nt Registered Ag	jent			10. Name and Address of New Registered Agent
DELL	COLUE DOMAN C			81	Name	·
DEUSCHLE, BRIAN C			82	Street A	Address (P.O. Box Number is Not Acceptable)	
800 SE 3RD AVE, SUITE 500 FT LAUDERDALE FL 33316						
FIL	AUDERUALE PL 33316			83		
				84	City	85 Zip Code
						FL 63 Elp code
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508,	Florida Statutes,	the above	e-named o	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
	m familiar with, and accept the obliga					diamon's board of directors. Thereby accept the appointment ac regions to
SIGNATURE						
	Signature, typed or printed hame of registered age		(NOTE: Re		t signature re	required when reinstating) DATE
12.		ND DIRECTORS	X DELETE	13.	—	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D  [X] Change
TITLE	D		M DECE IE	1.1 TITLE		
NAME	HALE, CHRISTOPHER D			1.2 NAME	[	Boris Gershfield
STREET ADDRESS	800 SE 3RD AVE, SUITE 500			1.3 STREET	- 1	2455 E. Sunrise Blvd., Suite 618
CITY-ST-ZIP	FT LAUDERDALE FL 33316		DELETE	1.4 CITY-ST	r-ZIP	Ft. Lauderdale, FL 33304
TITLE			LI VELETE	2.1 TITLE	1	
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET	- 1	
CITY-ST-ZIP			☐ DELETE	2.4 CITY-S' 3.1 TITLE	I-ZIP	
TITLE			_ 0	3.1 HILE	i	- □ Change □ Addition
NAME				3 2 NALEC		☐ Change ☐ Addition
STREET ADDRESS				3.2 NAME	ADDOCCO	☐ Change ☐ Addition
CITY-ST-ZIP				3.3 STREET	ļ	Change ☐ Addition
			□ DELETE	3.3 STREET 3.4. CITY-S	ļ	
TITLE			☐ DELETE	3.3 STREET 3.4. CITY-S 4.1 TITLE	ļ	Change Addition
TITLE NAME			DELETE	3.3 STREET 3.4. CITY-S 4.1 TITLE 4.2 NAME	T-ZIP	
TITLE NAME STREET ADDRESS			☐ DELETE	3.3 STREET 3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET	T-ZIP ADDRESS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				3.3 STREET 3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-SI	T-ZIP ADDRESS	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			☐ DELETE	3.3 STREET 3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET	T-ZIP ADDRESS	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME				3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S1 5.1 TITLE	T-ZIP  ADDRESS  T-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE			☐ DELETE	3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-ST 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-ST	ADDRESS ADDRESS ADDRESS	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ DELETE	3.3 STREET 3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S1 5.1 TITLE 5.2 NAME 5.3 STREET 6.1 TITLE	T-ZIP  ADDRESS 1-ZIP  ADDRESS 1-ZIP	Change Addition

14. I hereby certify that the information supplied with this filing obes 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 poort 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 postee 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 attachness, with an address, with all other like empowered.