PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000043157

1. Corporation Name

LI INTERNATIONAL BUSINESS, CORP.

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90100 021 ***150.00



Principal Place of Business Mailing Address 17.58 BAY DRIVE 4306 MAMB BEACH FL 33141 17.58 BAY DRIVE 4306 DRIVE 4306 BAY DRIVE 4306									
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Zip Country Zip Country Zip Country Zip Country S. This corporation owes the current year intangible Personal Property Tax. Yes No Yes No Yes No Yes No Yes No Yes Yes No Yes		3					1)		
9. Name and Address of Current Registered Agent DIAZ, JOSE-LUIS 7125 BAY DRIVE #306 MIAMI BEACH FL 33141 83 84 City FL 85 86 City FL 86 Size Address (P.O. Box Number is Not Acceptable) 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 lis registered agent, or both, in the State of Florida. Stuch change was authorized by the corporation submits this statement for the purpose of changing lis registered agent, arm familiar with, and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, arm familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TILE PD DIAZ, JOSE-LUIS TILE PD DIAZ, JOSE-LUIS 11 TITLE DIAZ, JOSE-LUIS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DIAZ, JOSE-LUIS 13. TITLE DIAZ, JOSE-LUIS 14. TITLE DIAZ, JOSE-LUIS 15. TITLE DIAZ, JOSE-LUIS 16. Change Addition MIAMI BEACH FL 33141 DELETE 21 TITLE DELETE 21 TITLE DELETE 31 TITLE DELETE		Country Zip			Country				
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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.

SIGNATURE: