

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90065 010 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000045808

1. Corporation Name
 FIRST UNION INTERNATIONAL FINANCE CORP.



Principal Place of Business: 8217 NORTHWEST 30TH TERRACE MIAMI FL 33122

Mailing Address: 8217 NORTHWEST 30TH TERRACE MIAMI FL 33122

*8056 NW 29th St
 MIA FL 33122*

DO NOT WRITE IN THIS SPACE

21	2. Principal Place of Business	2a. Mailing Address	29	30	3. Date Incorporated or Qualified	05/21/1998
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	28	4. FEI Number	65-0836634
23	City & State	26	City & State	25	5. Certificate of Status Desired	\$8.75 Additional Fee Required
24	Zip	24	Country	23	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
25	Country	29	Country	28	8. This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

81	9. Name and Address of Current Registered Agent	81	10. Name and Address of New Registered Agent
AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES FL 33134		82	Name
		83	Street Address (P.O. Box Number is Not Acceptable)
		84	City
		85	Zip Code

11. Pursuant to the provisions of Sections 807.0502 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: *[Signature]* DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOURA, DELMO	1.2 NAME	
STREET ADDRESS	8217 NORTHWEST 30TH TERRACE	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33122	1.4 CITY-ST-ZIP	
TITLE	SVD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAMPO, MARIO	2.2 NAME	
STREET ADDRESS	8217 NORTHWEST 30TH TERRACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33122	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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.

SIGNATURE: *[Signature]* DATE: 04/21/99

CR2E034 (1/98)