

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 # P98000060946

1. Corporation Name
VENTI DEL SUD, INC.



Principal Place of Business: **6503 N MILITARY TRAIL #3605 BOCA RATON FL 33496**
Mailing Address: **6503 N MILITARY TRAIL #3605 BOCA RATON FL 33496**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **07/09/1998**
4. FEI Number: **65-0852856** Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: **\$5.00** May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business: **21 260 CRANDON BLVD** Suite, Apt. #, etc.: **22 # 33** City & State: **23 Key BISCAYNE FL** Zip: **24 33149** Country: **25 USA**
2a. Mailing Address: **26 260 CRANDON BLVD** Suite, Apt. #, etc.: **27 # 33** City & State: **28 Key BISCAYNE FL 33149** Zip: **29 33149** Country: **30 USA**

9. Name and Address of Current Registered Agent: **MEYER, MARK 6503 N MILITARY TRAIL #3605 BOCA RATON FL 33496**

10. Name and Address of New Registered Agent: **81 Name MEYER, MARK 82 Street Address (P.O. Box Number is Not Acceptable) 260 CRANDON BLVD #33 83 84 City Key BISCAYNE FL 85 Zip Code 33149**

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 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]* (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	MEYER, MARK	
STREET ADDRESS	6503 N MILITARY TRAIL #3605	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MEYER, LYZ P	
STREET ADDRESS	6503 N MILITARY TRAIL #3605	
CITY-ST-ZIP	BOCA RATON FL 33496	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DIP/SIT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	MEYER, MARK	
1.3 STREET ADDRESS	260 CRANDON BLVD #33	
1.4 CITY-ST-ZIP	KEY BISCAYNE, FL 33149	
2.1 TITLE	D/VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	MEYER, LYZ P	
2.3 STREET ADDRESS	260 CRANDON BLVD #33	
2.4 CITY-ST-ZIP	KEY BISCAYNE, FL 33149	
3.1 TITLE	D/VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	MEYER, HAROLD	
3.3 STREET ADDRESS	260 CRANDON BLVD #33	
3.4 CITY-ST-ZIP	KEY BISCAYNE, FL 33149	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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]* **MARK MEYER PRESIDENT** Date: **4.20.99** 305 365 7675

CR2E034 (11/98)