PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90048 018 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000063326

INTERNATIONAL INVESTMENT INSIGHT, INC.

Principal Plac	ce of Business	Mailing Address				1 falltiller vie refet ritter meine detre nerer gegen år	196 13150 1111	, 41 gt W mell 1981	
745 NW 41 TE	RRACE	745 NW 41 TERRACE				:			
DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442			3442			DO NOT WRITE IN THIS SPACE			
]						3. Date Incorporated or Qualifed			i
						07/16/1998			
2. Principal Place of Business 2s. Malling Address						4, FEI Number	A	plied For	
21 26						65-0852148		ot Applicable	Į
Suite, Apt. #, etc Suite, Apt. #, etc.						5. Certificate of Status Desired		Additional	+.=
22		27					Fee Ri		
- City & Sta	to	City & State	ن ج د خــــــ	۔. •نت		- 6. Election Campaign Financing Trust Fund Contribution	V	May Be to Fees	
23 Zin	Country	28 Zip	Co	untry		This corporation owes the current year Intar		w : cas	
Zip 24	Country 25	29	30	, y			A Yes	□No	1
241	9. Name and Address of Curre		1901	Т_		10. Name and Address of New Registered A	gent		ĺ
<u> </u>				81	Name			_	
	PUTO, VINCENT			82	Street Arids	ess (P.O. Box Number is Not Acceptable)			ł
745 NW 41 TERRACE				[]	500000	oss (F.O. Box Hallison to Hot Hotelson)			l
DEE	ERFIELD BEACH FL 33442			83					(
				84	City		85 Zip	Code	1
ļ					_	oration submits this statement for the purpose of cl	!		ļ
SIGNATURE	Signature, typed or printed name of registered eq	ent and side if applicable. (NOT	E: Registers		t signeture require	d when ministating) ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	ORS IN 12	CR2E034 (11/98)
TITLE	PPESIDENT.	DELETE 1.		1.1 TITLE			Change	Addition	Ξ
NAME	PRESIDENT CARE	AVE 33067	1.21	1.2 NAME					8
STREET ADDRESS	LINGO NW OF	AVL 3.500	1,3 5	TREET	ADDRESS				
CITY-ST-ZIP			1.40	1.4 CITY-ST-ZIP					×
TITLE			211	21 TITLE			Change	☐ Addition	٦
NAME			221	22 NAME					
STREET ADDRESS					ADDRESS				-
CITY-ST-ZIP			_	CITY-ST	T-ZIP	<u> </u>	Change	Addition	1
TITLE	_		3.11			·	☐ cylange	L. ACCRECIO	J
NAME	 			WE			<u> </u>	<u> بەندىدىد</u>	-
STREET ADORES	s				ADORESS				
CITY-ST-ZIP				3.4. CITY-ST-ZIP			Change	Addition	1
TITLE				4.1 IIICE 4.2 NAME					l
NAME STREET ADDRESS				~	ADDRESS				1
STREET ADDRESS	이		435						
CITY-ST-ZIP				יוע-פיז					
NAME		DELETE		TIY-ST			☐ Change	Addition	
		☐ DELETE	5.17				☐ Change	Addition	
STREET ADDRESS	5	☐ DELETE	5.17 5.2 N	TILE			☐ Change	Addition	
1	s	☐ DELETE	5.17 5.2 N 5.3 S	TILE	ADDRESS				
STREET ADDRESS	S	☐ DELETE	5.17 5.2 N 5.3 S	TILE LANE STREET, STY-ST	ADDRESS		☐ Change	Addition	

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 cath; that I am an officer or director of the cooperation 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'S

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VINCENT CAPUTO

STREET ADDRESS