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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Kathérine Hafris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

TNITERNATIONAL

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90283 019 ***158.75

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11171	THE TERIOR HOWAL, INC.								
Principal Place of Business Mailing Address									
2272	RIVER PARK CIRC	LE	2272 R11	ER	PA	AK CILC	cie		
#925							DO NOT INDITE IN THIS SPACE		
7 103				, FL 32817			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
ORLANDO, FL 32817					_	25017	3. Date incorporated of Qualified		
2. Principal Pla	ace of Business	Mailing Address				4. FEI Number Applied For	1		
21	-				59-3529087 Not Applicable	1			
Suite, Apt. #	uite, Apt. #, etc.				\$8.75 Additional	7			
22						5. Certificate of Status Desired Fee Required			
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	1		
23 28							Trust Fund Contribution Added to Fees	₫_	
Zip - Country - Zip -			_ ′			~	8. This corporation owes the current year Intangible	Ī	
24 25 29			[30]				Personal Property Tax. Yes No	4	
9. Name and Address of Current Registered Agent					81	Name	10. Name and Address of New Registered Agent	1	
GERARDO LINDAUER 2272 RIVER PARK CIRLE, #9.				25		Name]	
					82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
					83			4	
ORLANDO, FC 328					••				
	2,4,70,16	20	(/		84	City	FL 85 Zip Code]	
11. Pursuant to	o the provisions of Sections 607.0502	and 607	.1508. Florida Statutes	. the a	bove	-named corpo	oration submits this statement for the purpose of changing its registered	i	
office or re	gistered agent, or both, in the State of	f Florida.	Such change was aut	horized	by t	the corporation	on's board of directors. I hereby accept the appointment as registered		
-	n familiar with, and accept the obligation	ons or, S	ection 607.0505, Fioric	ia Stati	nes.				
SIGNATURE S	Signature, typed or printed name of registered agent	and title if ap	pplicable. (NOTE: R	egistered	Agent	signature required	d when reinstating) DATE	1 -	
12.	OFFICERS AND			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	ع [
TITLE	PRESIDENT.		☐ DELETE	1,1 TITLE			☐ Change ☐ Addition	1	
	GERARDO LINDAU	EO		1.2 NAME				5	
STREET ADDRESS				1.3 STREET ADDRESS		ADDRESS		Ĺ	
CITY-ST-ZIP	ORLANDO, FL 328	317		1.4 CITY-		· ZIP		_ c	
TITLE	•		☐ DELETE	2.1 TITLE			☐ Change ☐ Addition		
NAME				2.2 NAME					
STREET ADDRESS	PRESS			2.3 STREE		ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		- ZiP]		
TITLE			☐ DELETÉ	3.1 TITLE			☐ Change ☐ Addition		
NAME				3.2 NAME					
STREET ADDRESS	EET ADDRESS			3.3 STREET ADDRESS		ADDRESS			
CITY-ST-ZIP			3.4. CI		-21P		1		
TITLE			☐ DELETE	4.1 TITLE			☐ Change ☐ Addition	1	
NAME				4 2 NAME		1			
STREET ADDRESS	·		1		ADDRESS				
CITY-ST-ZIP			[] DELETE	4.4 CITY-5		-ZIP	Chesso C Addition	-	
TITLE			☐ DELETE	5.1 TITLE 5.2 NAME		1	☐ Change ☐ Addition		
NAME	-					ADDDESS	I		
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP				6.1 TIT	CITY-ST-ZIP		☐ Change ☐ Addition		
TITLE	and the second of		□ DELETE	6.2 NA			□ change □ Addition		
NAME				ľ		ADDRESS			
STREET ADDRESS	iss i i i			KEEL!	l l		{		

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:

GERARDO TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR