SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000078051

NEW PH INTERNATIONAL, INC.

SIGNATURE:

FILED Jul 15, 1999 8:00 am Secretary of State

07-15-1999 90016 017 ***550.00

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7-12-99

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|--|---|--|--|---|--|-----------------|---|-------------|---------------|
| Principal Place | | Mailing Address | | = | | | | | _ |
| 3100 NW 72 AVI | E | 3100 NW 72 AVE STE 108 | - | | | | • | | |
| 5/E 106 Miami FL 33122 | | MIAMI FL 33122 | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | ······································ | | | 3. Date Incorporated or Qualified | | | | |
| | | | | | 09/04/1998 | | | | |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | | | A FEI Number | 767 | A | pplied Fo | r |
| 21 | | 26 | 26 | | 65-0860 | | | ot Applica | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | • | 5. Certificate of Status Desired | | | Additiona | ad l |
| 22 | | 27 | | | C. Coramono or circus acoust | | Fee R | equired | |
| City & State | | City & State | City & State | | 6. Election Campaign Financing \$5.00 May Be | | | | |
| 23 | | 28 | | | Trust Fund Contribution | | Added | to Fees | |
| Zip | Country | Zip | Countr | ry | 8. This corporation owes the curr | - — | res [| No | |
| 24 | 9. Name and Address of Cu | 29 | 30 | | Intangible Personal Property. 10. Name and Address of New I | | | 7 140 | |
| | s. Name and Address of Ct | nusur vadistalen ydaur | 8 | 1 Name | TV. Haine and Address of New 1 | registered rig | VIII. | | |
| GONZ | ZALEZ, LUIS | | | | | | , | | |
| | NW 72 AVE | | 8: | 2 Street Addr | ress (P.O. Box Number is Not Accepta | able) | | | |
| STE | | | 8: | 3 | | | | | |
| MIAM | II FL 33122 | | L. | | | | | | |
| | | | 8- | 4 City | | FI | 85 Zip | Code | |
| 11. Purcuant | to the provisions of sections 607 | 0502 and 607 1508 Florida Stati | utes: the above | e-named como | pration submits this statement for the pr | urpose of chang | ging its re | egistered | |
| office or I | registered agent or both in the S | State of Florida. Such change wa obligations of, section 607.0505, | s authorized b | ov the comoratio | ion's board of directors. I hereby accept | pt the appointm | ent as re | gistered | |
| agent, La | am tamiliar with, and accept the o | obligations of, section 607.0505, | rionga Statute | | | | | | |
| | | , | | . | | | | | |
| SIGNATURE . | | , , , , , , , , , , , , , , , , , , , | | | juired when reinstating) | DATE | | | |
| SIGNATURE . | Signature, typed or printed name of registere | , , , , , , , , , , , , , , , , , , , | | | uired when reinstating) ADDITIONS/CHANGES TO OF | | DIRECT | ORS IN 1 | 2 |
| SIGNATURE . | Signature, typed or printed name of registere | ad agent and title if applicable | (NOTE: Registered | Agent signature requ | | | DIRECT: | | 2 lition |
| SIGNATURE . 12. TITLE | Signature, typed or printed name of registers OFFICER: | ed agent and title if applicable | (NOTE: Registered | Agent signature requ | | | | | |
| SIGNATURE . 12. TITLE NAME | Signature, typed or printed name of registere OFFICER: | ad agent and title if applicable | (NOTE: Registered 13. 1.1 TITLE 1.2 NAME | Agent signature requ | | | | | |
| SIGNATURE . 12. TITLE NAME | Signature, typed or printed name of registers OFFICER: PTD GONZALEZ, LUIS | ad agent and title if applicable | (NOTE: Registered 13. 1.1 TITLE 1.2 NAME | Agent signature requ | | | | | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS | Signature, typed or printed name of registers OFFICER: PTD GONZALEZ, LUIS 3100 NW 72 AVE STE 108 | ad agent and title if applicable | 13. 1.1 TITLE 1.2 NAME 1.3 STREE | Agent signature requirements of the | | | | Add | |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registers OFFICER: PTD GONZALEZ, LUIS 3100 NW 72 AVE STE 108 | od agent and title if applicable S AND DIRECTORS DELETE | 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-1 | Agent signature requirements of the | | | Change | Add | lition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature, typed or printed name of registers OFFICER: PTD GONZALEZ, LUIS 3100 NW 72 AVE STE 108 | od agent and title if applicable S AND DIRECTORS DELETE | (NOTE: Registered 13. 1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-4 2.1 TITLE 22 NAME | Agent signature requirements of the | | | Change | Add | lition |
| SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature, typed or printed name of registers OFFICER: PTD GONZALEZ, LUIS 3100 NW 72 AVE STE 108 | od agent and title if applicable S AND DIRECTORS DELETE | (NOTE: Registered 13. 1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-4 2.1 TITLE 22 NAME | Agent signature requirements of the | | | Change | Add | lition |
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| SIGNATURE 12. 717LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP | Signature, typed or printed name of registers OFFICER: PTD GONZALEZ, LUIS 3100 NW 72 AVE STE 108 | od agent and title if applicable S AND DIRECTORS DELETE | (NOTE: Registered 13. 1.) TITLE 1.2 NAME 1.3 STREE 1.4 CITY-4 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-4 | Agent signature requirements of the | | | Change | Add | dition |
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