

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

FILED
Sep 21, 1999 8:00 am
Secretary of State

09-21-1999 90016 001 ***550.00

PROFIT CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # **P98000080083** ✓

1. Corporation Name
INTERNATIONAL LOVE CONNECTION INC.



Principal Place of Business
 P.O. BOX 526965
 MIAMI FL 33152

Mailing Address
 P.O. BOX 526965
 MIAMI FL 33152

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/16/1998

2. Principal Place of Business
 21 **PO BOX 830699** **MIAMI FL 33283**

2a. Mailing Address
 26 **PO BOX 830699** **MIAMI FL 33283**

4. FEI Number

65-0879246

Applied For

Not Applicable

22 **MIAMI FL**

27 **MIAMI FL**

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 **33283**

28 **33283**

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 **USA**

29 **USA**

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

CALDERON, EDUARDO
 1201 S.W. 102ND AVE.
 PEMBROKE PINES FL 33025

LUZ CALDERON
 12882 SW 62 TER
 MIAMI FL 33183

10. Name and Address of New Registered Agent

81 Name **CALDERON LUZ**
 82 Street Address (P.O. Box Number is Not Acceptable) **12882 SW 62 TER**
 83 **MIAMI FL**
 84 City **MIAMI FL** 85 Zip Code **33183**

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 **LUZ CALDERON PRESIDENT** **9/12/99**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD <input type="checkbox"/> DELETE	1.1 TITLE	CALDERON LUZ <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CALDERON, EDUARDO LUZ CALDERON	1.2 NAME	CALDERON LUZ
STREET ADDRESS	1201 S.W. 102ND AVE 12882 SW 62 TER	1.3 STREET ADDRESS	12882 SW 62 TER
CITY-ST-ZIP	PEMBROKE PINES FL 33023 MIAMI FL 33183	1.4 CITY-ST-ZIP	MIAMI FL 33183
TITLE	SVD <input type="checkbox"/> DELETE	2.1 TITLE	VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CALDERON, LUZ CALDERON LUZ D.	2.2 NAME	CALDERON LUZ D.
STREET ADDRESS	12882 S.W. 62ND TERRAGE 12882 SW 62 TER	2.3 STREET ADDRESS	12882 SW 62 TER
CITY-ST-ZIP	MIAMI FL 33182 MIAMI FL 33183	2.4 CITY-ST-ZIP	MIAMI FL 33183
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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: **LUZ CALDERON PRESIDENT** **9/12/99** **305 382-5180**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/98)