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 # P98000080350 1. Corporation Name

SIUI AMERICA, INC.

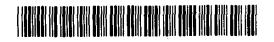
Principal Place of Business

CITY-ST-ZIP

Mailing Address

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90112 020 ***150.00



	ST 72ND AVENUE	MIAMI FL 33166					
MIAMI FL 33166		MIAMI FL 33100			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					09/17/1998		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Ap	plied For	
21 SK	me	26 SAME			65-0863433	No	t Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired — \$8.75. Additional Fee Required		
City & State	9	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip			8. This corporation owes the current year Intangible		
24	25 29 30			Personal Property Tax. Yes You			
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
			81	Name]
	RILAWYER		82 Street Ad		ddress (P.O. Box Number is Not Acceptable)	,	
	ALMERIA AVENUE		"	O. O. O.	,		
COR	AL GABLES FL 33134		83				ĺ
			84	City	F	85 Zip	Code
		1007 (500 El 1) Otto	45 - 5 -				registered
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida. Such change was aut	топхеа ру	the corpor	orporation submits this statement for the purpose ation's board of directors. I hereby accept the app	ointment as re	gistered
SIGNATURE					puired when reinstation) DATE		——
	Signature, typed or printed name of registered agent OFFICERS ANI		13,	nt signature rec	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DRS IN 12
12.		DELETE	1.1 TITLE		Applitation and the contract of the contract o	Change	☐ Addition
TITLE	1010		1.2 NAME				_
ALVANILZ, SOOL S				TADDDECC			
STREET ADDRESS 4361 NORTHWEST 72ND AVENUE				T ADDRESS			ì
CITY-ST-ZIP	MIAMI FL 33166	☐ DELETE	1.4 CITY-S 2.1 TITLE	31-ZIP		Change	Addition
TITLE			2.2 NAME				- I
NAME				T ADDRESS			j
STREET ADDRESS				- 1			
CITY-ST-ZIP		DELETE	2. 4 CITY-:	51-ZIP		Change	Addition
TITLE		C DECENT	3.2 NAME				_
NAME				T 4000000		•	{
STREET ADDRESS				T ADORESS			1
CITY-ST-ZIP		☐ DELETE	3.4. CITY-	S1-ZIP		Change	Addition
TITLE	_			[
NAME			4. 2 NAME	i			
STREET ADDRESS				TADDRESS			•
CITY-ST-ZIP	<u> </u>	☐ DELETE	4.4 CITY-S 5.1 TITLE	st-ZIP		☐ Change	Addition
TITLE		□ DELETE	5.1 IIILE 5.2 NAME				
NAME				T ADDRESS			
STREET ADDRESS			5.4 CITY-S				.
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	01-711		Change	Addition
TITLE			1			Gridings	
NAME	1		6.2 NAME	T ADDOESE			ļ
STREET ADDRESS	EET ADDRESS			T ADDRESS			ļ
C/TY-ST-7IP	' / i		64 CITY-5	51-ZIP			