

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

FILED
Apr 30, 1999 8:00 am
Secretary of State

04-30-1999 90194 004 ***150.00

DOCUMENT # P98000085670

1. Corporation Name
PERNER SALES INTERNATIONAL INC.

Principal Place of Business

8601 N.W. 45TH ST.
CORAL SPRINGS FL 33065

Mailing Address

8601 N.W. 45TH ST.
CORAL SPRINGS FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/06/1998

4. FEI Number

65-0876709

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21 4100 N. POWERLINE ROAD

2a. Mailing Address

26 4100 N. POWERLINE ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE X-5

27 SUITE X-5

City & State

City & State

23 POMPANO BEACH, FL.

28 POMPANO BEACH, FL.

Zip Country

29 33073 30 U.S.A.

24 33073 25

9. Name and Address of Current Registered Agent

PERNER, PAULINA
8601 N.W. 45TH ST.
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name PERNER, PAULINA

82 Street Address (P.O. Box Number is Not Acceptable)

4100 N. POWERLINE ROAD, SUITE X-5

83

84 City POMPANO BEACH

FL

85 Zip Code 33073

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/22/99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME PERNER, ALEJANDRO

STREET ADDRESS 8601 N.W. 45TH ST.
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE D ☐ DELETE

NAME PERNER, PAULINA

STREET ADDRESS 8601 N.W. 45TH ST.
CITY-ST-ZIP CORAL SPRINGS FL 33065

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE

STREET ADDRESS ☐ DELETE

CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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:

Signature, typed or printed name of registered agent and title if applicable.

4/22/99

(954) 968-6070

CR2E034 (11/98)