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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$17115

(4)

FILED Apr 15 1998 8:00am Secretary of State

U.S. IN	PORT & PROMOTIONS CO	D., INC.				BYON BYON ON AND CHOICE STOR
Principal Place	a of Rueinass	Mailing Address	·			ELBAK BIRBIA DIBIA BIBUH RABUK KBRI
Principal Place of Business Mailing Address 407 LINCOLN ROAD. SUITE 12-D MIAMI BEACH FL 33139 MIAMI BEACH FL 33139					DO NOT WRITE IN TH	HIS SPACE
					3. Date Incorporated or Qualified	· · · · · · · · · · · · · · · · · · ·
					12/05/1990	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0251825	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
		City & State	ity & State		8. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Count	гу	8. This corporation owes or has paid the	current year Intengible
24	25	29	30		Personal Property Tax due June 30.	☐ Yes ☐ No
	g. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	ed Agent
i MC	DANIEL, PHILIP		8	Name		
407 LINCOLN ROAD, #12-D			8	Street A	ddress (P.O. Box Number is Not Acceptable)	
MU	AMI BEACH FL 33139		L			
			8	3		
j			8	4 City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida 3				ve-named c		
office or r	egistered agent, or both, in the Stat	e of Florida. Such change was	authorized I	y the corpo	oration's board of directors. I hereby accept the	appointment as registered
I	in familial with and accept the boil	gations of, Section 607.0505, i	IONUA SIAIUI	75 .		
SIGNATURE	Signature, typed or printed name of registered as	gent and title if applicable (NC	OTE: Registered A	geni signature re	equired when reinstating) DAT	
12.	OFFICERS AN	ND DIRECTORS	13.	.	ADDITIONS/CHANGES TO OFFICERS /	AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE			Change Addition
NAME	MCDANIEL, PHILIP		1.2 NAM	:		
STREET ADDRESS	407 LINCLN ROAD, #12-D		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY	ST-ZIP		
TITLE	CFO	DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	THOMAS, JOHN		2.2 NAM	:]		
STREET ADDRESS	5589 DESCARTES CIR		2.3 STRE	ET ADDRESS		
CITY - ST - ZIP	BOYNTON BCH FL		2. 4 CITY	-ST-ZIP		
TITLE		L DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAM	í		
STREET ADDRESS			3.3 STRE	ET ADDRESS		
CITY - ST - ZIP			3.4. CITY			
TITLE		☐ DELETE	4.1 TITLE	Ī		Change Addition
NAME			4. 2 NAW			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP		T perese	4.4 CITY			Discon Labore
TITLE		☐ DELETE	5.1 TITLE	1		Change Addition
NAME			5.2 NAM			
STREET ADDRESS			1	ET ADDRESS		
CITY - ST - ZIP	<u> </u>	T no eve	5.4 CITY			Change Address
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAMI	1		
STREET ADDRESS				ET ADORESS		
CITY-ST-ZIP	The state of the s	541 (6 1 PP) - 2	6.4 CITY	ST-ZIP	III O TO THE PARTY OF THE PARTY	

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 is supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or/fin receiver or trigger 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 or an extension that my name appears in Block 12 or Block 13 if changed.

SIGNATURE: