

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 3:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S47905 (2)

1. Corporation Name

BTL INTERNATIONAL ENTERPRISES, INC.

Principal Place of Business

8260 W FLAGLER ST
1-G
MIAMI FL 33144
US

Mailing Address

8260 W FLAGLER ST
1-G
MIAMI FL 33144
US

200001517872

-06/20/95--01096--001

****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/25/1991

3a. Date of Last Report

05/11/1994

4. FEI Number

65-0255480

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 has liability for intangible tax under S 199.032,

Florida Statutes

☒ Yes

☐ No

2. Principal Place of Business

21 12445 SW 31 CT

Suite, Apt #, etc.

22

City & State

23 MIAMI FL.

Zip

24 33175

Country

25 E-EUU.

2a. Mailing Address

26 12445 SW 31 ST

Suite, Apt #, etc.

27

City & State

28 MIAMI FL.

Zip

29 33175

Country

30 E-EUU.

9. Name and Address of Current Registered Agent

LONGARAY, MADELEINE D.
8360 WEST FLAGLER ST.
SUITE 203
MIAMI FL 33144

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	KOSTETSKY, FERNANDO I
STREET ADDRESS	8860 W FLAGLER ST 1-G
CITY, ST, ZIP	MIAMI FL
TITLE	SV
NAME	KOSTETSKY, JUANA FELISA K
STREET ADDRESS	8860 W FLAGLER ST 1-G
CITY, ST, ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PTD	☐ Change ☐ Addition
2. NAME	KOSTETSKY FERNANDO I	
3. STREET ADDRESS	18151 NE 31 CT # 1602	
4. CITY, ST, ZIP	MIAMI FL 33160	
21. TITLE	SV	☐ Change ☐ Addition
22. NAME	KOSTETSKY JUANA F. K.	
23. STREET ADDRESS	18151 NE 31 CT # 1602	
24. CITY, ST, ZIP	MIAMI FL 33160	
31. TITLE		☐ Change ☐ Addition
32. NAME		
33. STREET ADDRESS		
34. CITY, ST, ZIP		
41. TITLE		☐ Change ☐ Addition
42. NAME		
43. STREET ADDRESS		
44. CITY, ST, ZIP		
51. TITLE		☐ Change ☐ Addition
52. NAME		
53. STREET ADDRESS		
54. CITY, ST, ZIP		
61. TITLE		☐ Change ☐ Addition
62. NAME		
63. STREET ADDRESS		
64. CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(6)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 liquidator 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUANA KOSTETSKY MARCM - 15/11/1995

Date

Signature (Typed or printed name of registered agent and title if applicable)