FILED Apr 09, 1999 8:00 am Secretary of State

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Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **S59976**

1. Corporation Name

Principal Place of Business

INTERNATIONAL BAL, INC.

328 CRANDON STE. 202 KEY BISCAYNE		328 CRANDON BLVD. STE. 202 KEY BISCAYNE FL 33149		DO NOT WRITE IN TH	IS SPACE
US	us			3. Date Incorporated or Qualifed 06/17/1991	
	ace of Business	2a. Mailing Address	1 1/12	4. FEI Number	Applied For
21 260	CRANDON BLUD	26 260 CRANDO	N BLUD	65-0321469	Not Applicable
Suite, Apt.		Suite, Apt. #, etc. Suite 14		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & States	we FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip/ 24 33/4	Country	zip 33/49 30	Country	8. This corporation owes the current year l Personal Property Tax.	Intangible ☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent
81 Name					
SALA, A. ROSEMARY				Address (P.O. Box Number is Not Acceptable)	-
328 CRANDON BLVD.				Address (P.O. Box Number is Not Acceptable)	
STE. 202				ite 14	
KEY	BISCAYNE FL 33149		84 City	-	85 Zip Code
		//	Pour	BISCAYNE F	L 33/47
11. Pursuant to the provisions of Sections 607.0502 and 607/1505. 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, and 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.					
agent. I a	m familiar with, and accept the obligation	ns of Section 607,0505, Florid	a Statutes.		- 99
SIGNATURE					<u> </u>
	Signature, typed or printed name of registered agent		gistered Agent signature re	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	OFFICEB8 AND	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OTH ICERS	Change Addition
NAME	MENDOZA, ANGEL AUGUSTO				/
	328 CRANDON BLVD., STE. 202)	1.3 STREET ADDRESS	260 CRANDON BIND Ste 14	
STREET ADDRESS	KEY BISCAYNE FL	,	1.4 CITY-ST-ZIP	Key BISCAYNE FL 33/4	19
CITY-ST-ZIP	D	☐ DELETE	2.1 TITLE	Key BISCAYNE FL 3314	Change Addition
NAME	MENDOZA, BELINDA FLORES		2.2 NAME		,, /~
STREET ADDRESS	328 CRANDON BLVD., SUITE 20)2	2.3 STREET ADDRESS	260 CRANDON BLUD Stel	4
CITY-ST-ZIP	MIAMI FL	,_	2. 4 CITY-ST-ZIP	Key BISCAYNE FLORIDA 3	33/49
TITLE	D	☐ DELETE	3.1 TITLE	260 CRANDON BLUD SIE! Key BISCAYNE FLORIDA 3	Change
NAME	SALA, ANA ROSEMARY		3.2 NAME	m Plus cla	14
STREET ADDRESS	328 CRANDON BLVD.		3.3 STREET ADDRESS	260 CRANDON BLUD Ste	-//
CITY-ST-ZIP	KEY BISCAYNE FL		3.4. CITY-ST-ZIP	Key BISCAYNE FLORIDA	33149
TITLE		☐ DELETE	4.1 TITLE	/	Change Addition
NAME			4. 2 NAME		l
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		1
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		Change C Addition
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		•	6.2 NAME		

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 amful 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 articlement with an address part of the repowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

305-361-0105