PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90090 003 ***150.00

1. Corporation	MENT # S61158 S INTERNATIONAL, INC.	3						
Principal Place	e of Business	М	ailing Address			T COMPANIEM FROM MARION (COMPANIEM MARIA AND	MI VIVIE VIRKI VIALI	DIRII GIGII 1881
2665 S BAYSHO			65 S BAYSHORE DR					
SUITE 984 50	07- 07-		4 502			·		
COCONUT GROVE FL 33133 COCONUTS GROVE FL 331			OCONUTS GROVE FL 33133			DO NOT WRITE IN THIS SPACE		
US		US	3			3. Date Incorporated or Qualifed		
						06/20/1991 4. FEI Number	T" 1 A	pplied For
· ·	lace of Business		. Mailing Address			65-0271687	-	ot Applicable
21	# 040	26	Suite, Apt. #, etc.			03-027 1067		Additional
Suite, Apt.	#, etc. ⊅⊋	27	502		•	5. Certifcate of Status Desired	**	equired
22 5 City & State			City & State			6. Election Campaign Financing	-\$5.00	May Be
23	,	28				Trust Fund Contribution	•	to Fees
Zip				Country	o. This corporation are a series of the seri			
24	25	29	30	0		Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curre	nt Regis	stered Agent			10. Name and Address of New Register	ed Agent	
GOMBOS, DONALD R 1105 QUEEN PALM COURT				81 82	Name Street Addi	ess (P.O. Box Number is Not Acceptable)		
HOL	LYWOOD FL 33019			83				
				84	City	F	85 Zip	Code
office or re agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	of Flori	da. Such change was autr	nonzed by	the corporation	poration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing it pointment as r	s registered egistered
SIGNATURE	Signature, typed or printed name of registered age	ent and title		a mintered Amer	nt signature require	nd when reinstating) DATE		
		OUT 0110 200	if applicable. (NOTE: Re	ağıstaracı Ağal		a,		
12.	OFFICERS A		CTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
12. TITLE	OFFICERS A		<u>'''</u>			a,	AND DIRECTO	ORS IN 12
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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.

6.4 CMY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP