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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S65144

HELLER'S INTERNATIONAL, INC.

				- <u> </u>	011 03011 04011 01045 0 1	HIJH WANDA KANDA
Principal Place	e of Business	Mailing Address				
1047 DEERPATI		1047 DEERPATH CT				
101 MADEIRA A	· • • · · · · · · · · · · · · · · · · ·	101 MADEIRA AVENUE		DO 1107 111777 111 T	10.00405	
WESTON FL 33326		WESTON FL 33326		DO NOT WRITE IN THIS SPACE		
US		U\$		3. Date in corporated or Qualifed		
				07/10/1991		
2. Principa P	lace of Business	2a. Mailing Address	٠. ــــــــــــــــــــــــــــــــــــ	4. FEI Number		pied For
21 104-1	Deerpath Ct	26 1047 Deer	path ct	65-0277928	Not	t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	1	5. Certificate of Status Desired	\$8.75 A	
22 —		27		3. Certificate of otatus desired	Fee Re	quired
City & S ate		City & State		6. Election Campaign Financing \$5.00 May Be		May Be
23 Nes	tan, FL	28 Weston F	-(.	Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Country	8. This corporation owes the current year		
24 333	26 25 Browerd	29 33326 30	Broward	Personal Property Tax.	☐ Yes	29No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	ed Agent	
			81 Name			
	IULO, CARLOS		00 00 00	Idea (D.C. Dev Newster in Met Accomtable)		
1047	DEERPATH CT		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)		
WES	STON FL 33326		83			
			84 City		85 Zip C	Code
						registered
11, Pursuant office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o	and 607.1508, Florida Statu es, I Florida, Such change was autho	ine above-named co prized by the corpora	poration submits this statement for the purpose ation's board of directors. I hereby accept the ap	p sintment as reg	ji stered
			a. ,	- , , ,		
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	Statutes.			
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida	Statutes.			
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florida and title if applicable. (NOTI: Reg	gistered Agent signature requ	- — — — — — — — — — — — — — — — — — — —		
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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 on address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP