ANNUAL REPORT
1995

Division of Corporations

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S68473 (5)

1. Corporation Name

PROCUREMENT SERVICES OVERSEAS INC. (P.S.O.I.)

Principal Place of Business	Mailing Address
3440 HOLLYWOOD BLVD., SUITE 425 HOLLYWOOD, FL. 33021	

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 07/18/1991
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	☐ Applied For ☒ Not Applicable
21	26		
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24 / Country 25	Zip 29 / Country 30	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent

KAPLAN, ERIC J.
201 ALHAMBRA CIRCLE
S-1200
CORAL GABLES, FL. 33134

10. Name and Address of New Registered Agent

81 Name: RAMIREZ, MARTA C.
82 Street Address (P.O. Box Number is Not Acceptable): 3440 HOLLYWOOD BLVD., SUITE 425
83
84 City: MIAMI FL 85 Zip Code: 33021

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 agree to the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] MARTA C. RAMIREZ 2/07/95
(Signature, Typed or Printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☒ Change ☐ Addition
NAME	MONTOYA, ALVARO	1.2 NAME	
STREET ADDRESS	1855 N.W. 70 AVE.	1.3 STREET ADDRESS	3440 Hollywood Blvd., Suite 425
CITY-ST-ZIP	MIAMI, FL. 33126	1.4 CITY-ST-ZIP	Hollywood, Fl. 33021
TITLE	D	2.1 TITLE	☒ Change ☐ Addition
NAME	LARA, JAIME	2.2 NAME	
STREET ADDRESS	1855 N.W. 70 AVE.	2.3 STREET ADDRESS	3440 Hollywood Blvd., Suite 425
CITY-ST-ZIP	MIAMI, FL. 33126	2.4 CITY-ST-ZIP	Hollywood, Fl. 33021
TITLE	D	3.1 TITLE	☒ Change ☐ Addition
NAME	PARDO, JUAN MANUEL	3.2 NAME	
STREET ADDRESS	1855 N.W. 70 AVE.	3.3 STREET ADDRESS	3440 Hollywood Blvd., Suite 425
CITY-ST-ZIP	MIAMI, FL. 33126	3.4 CITY-ST-ZIP	Hollywood, Fl. 33021
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	T/S, 4/10/95
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	200001455952
STREET ADDRESS		5.3 STREET ADDRESS	-04/12/95--01020--003
CITY-ST-ZIP		5.4 CITY-ST-ZIP	****200.00 ****200.00
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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(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.

SIGNATURE: [signature] 2/9/95 305-963-7007
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone #