PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 30, 1999 8:00 am Secretary of State 04-30-1999 90107 026 ***158.75

 Corporation 	MENT # S72447 S INTL SUPPLIERS INC				1 1881/1888 NA 1881 B 1887 A 1881 A1887 A	RIPRI BIBLI BIBLI BIBLI	AIT BIBN IBAI
	_	·					
Principal Place	of Business	Mailing Address			r 1861ling 114 18819 11611 Avers dient reen	. ,	, E. (1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
7747 SW 86TH	STREET	7747 SW 86TH STREET				,	
SUITE D101 MIAMI FL 33143	-	Suite D101 Miami Fl 33143			DO NOT WRITE IN	THIS SPACE	
US		US			3. Date incorporated or Qualifed		
					08/12/1991	,	
	ace of Business	2a. Mailing Address	36Lh ST		4. FEI Number	·	olied For
			56 LM 31		65-0281603	\$8.75 A	Applicable
Suite Apt.	· ·	Suite Apt. #, etc.		•	5. Certifcate of Status Desired	Fee Red	
22					6. Election Campaign Financing	\$5.00	May Be
23 MIAN		28 MIAMI, FL	_		Trust Fund Contribution	Added to	
Zip Country Zip			Country		8. This corporation owes the current ye	ar Intangible]
<u> 24] 3314</u>	3 25 US	29 33 43 30	115	·	Personal Property Tax.		ØNo
	9. Name and Address of Current I	Registered Agent	81	Name	10. Name and Address of New Registe	ered Agent	_
SOL	RDIS-G, BEATRIZ					*	
7747 SW 86 ST			82	Street Addres	ss (P.O. Box Number is Not Acceptable)		
SUITE D-101			83		. ,		
MIAMI FL 33143				014		85 Zip C	ode
	8	,		City		FL	
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 reinstating) DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
12.	OFFICERS AND	DIRECTORS DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICER	Change	Addition
TITLE	PD COUNTRY OF PEATEIT	□ OELETE	1.2 NAME				
NAME STREET ADDRESS	SOURDIS-G, BEATRIZ 7747 SW 86 ST #D-101		1.3 STREET A	IDORESS !			ţ
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-2	F			
TITLE	STD	☐ DELETE	2.1 TITLE			Change	Addition
NAME	PATTERSON, MARIA MERCEDES	1	2.2 NAME	ľ			ļ
STREET ADDRESS	6830 SW 65 ST		2.3 STREET A	DORESS	•		*
CITY+ST-ZIP	MIAMI FL		2.4 CITY-ST-	ZIP		Clehanna	Addition
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME	DODECO			į
STREET ADDRESS			3.3 STREET A 3.4. CITY-ST-				1
CITY-ST-ZIP		- DELETE	4.1 TITLE	ZIF		Change	☐ Addition
NAME			4. 2 NAME				ţ
STREET ADDRESS			4.3 STREET A	NDORESS	•	٠,	}
CITY-ST-ZIP			4.4 CITY-ST-	ZIP			
TITLE	4.	☐ DELETE	5.1 TTTLE			☐ Change	☐ Addition
NAME	,		5.2 NAME	DDDECC		• •	
STREET ADDRESS			5.3 STREET A 5.4 CITY-ST-				Ì
CITY-ST-ZIP		Û DELETE	6.1 TITLE	<u> </u>		☐ Change	Addition
TITLE NAME		ب محدد، د	6.2 NAME			0-	_
STREET ADDRESS	, A		6.3 STREET A	DORESS		:	ļ
CITY-ST-ZIP			6.4 CITY-ST-	ZIP	·		
14 homby	100 at a 41 - 1 - 0	10 - 515 156 - 6		a stated in Co	ection 119 07(3)(i) Florida Statutes, I furthe	ar cortify that the in	nformation

indicated on this annual report or supplied with this timing does not quality for the exemption stated in Section 119.07(5)(f), Fronta statutes. First the findicated on this annual report or suppliemental 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.

SIGNATURE: