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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCU	MENT # S85875					
 Corporation 	TERNATIONAL LIMITED, INC					
SIAN III	TENNATIONAL LIMITED, INC	<i>)</i> •		a charrent cut anna Carby (barra)	IANI NIIL BING NANI NIBI NIBI NIBIL NIBIL NIBIL	111 1 88 1
Principal Place	e of Business	Mailing Address		T FEBRURIE (OL 1910) AND IRENY II		
8181 NW 67 ST	r	8181 NW 67 ST				
MIAMI FL 33166	6	MIAMI FL 33166		20 11071110	TE IN THE SEASE	
US		US			ITE IN THIS SPACE	
				3. Date Incorporated or Qualifed 10/07/1991		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied I	For
21		26		65-0290922	Not Appl	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additio	nal
22 27		27		5. Certificate of Status Desired	Fee Required	1
City & State City & State		City & State		6. Election Campaign Financing	\$5.00 May E	Зе
23		28		Trust Fund Contribution	Added to Fee	s
Zip	Country	Zip	Country	8. This corporation owes the cur		,
24	25		30]	Personal Property Tax.	☐ Yes 【☐ No	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New	Registered Agent	
TEJERA, GEORGINA				GEORGINA T	EJERA	
11364 SW 68 TERR.			82 Street	Address (P.O. Box Number is Not Accept	DI 11Z	
MIAMI FL 33173			83	3135 N.W. 729	FLAUC	
				, <u> </u>	·	
			84 City	U.pui	FL 85 Zip Code	2 .
11. Pursuant i	to the provisions of Sections 607 0502	and 607.1508 Florida Statutes	s, the above-named	corporation submits this statement for the		ered
office or re	egistered agent, or both, in the State of	f Florida. Such change was aut	thorized by the corpo	pration's board of directors. I hereby acce	pt the appointment as registere	eď
-	m familiar with, and accept the obligation	ons of, Section 607.0303, Flori	ua Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent :	and title if applicable. (NOTE: F	Registered Agent signature r	equired when reinstating)	DATE	-
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OF		12
TITLE	DPV	☐ DELETE	1.1 TITLE	TEVERA, GEORGIN	Z ☐ Change ☐	Addition
NAME	TEJERA, GEORGINA		1.2 NAME	TEVERA, CEURGINA	9/	
STREET ADDRESS	11364 SW 68 TERR.		1.3 STREET ADDRESS	3135 N.W. 997	<i>L</i> ;	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	MIAMI, FL 33		
TITLE	ST	☐ DELETE	2.1 TITLE	ST CEORGIN	⊘ *Change □	Addition
NAME	TEJERA, GEORGINA		2.2 NAME	TEVERA, GEORGINA	٠ <u>٠</u>	ļ
STREET ADDRESS	11364 SW 68 TERR.		2.3 STREET ADDRESS	3/35 N.W. 99 P	2:70	į
CITY-ST-ZIP	MIAMI FL	□ priste	2.4 CITY-ST-ZIP	MIAMI, FL 3:		
TITLE	•	☐ DELETE	3.1 TITLE		☐ Change ☐ i	Addition
NAME			3.2 NAME			J
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	3.4, CITY-ST-ZIP 4.1 TITLE		☐ Change ☐	Addition
TITLE NAME			4.3 IIILE 4.2 NAME		□ Gliange □ 1	HUURUUN
STREET ADDRESS			4.3 STREET ADDRESS	. \		ļ
CITY-ST-ZIP			4.4 CITY-ST-ZIP	• • • •		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ /	Addition
NAME	·	\	5.2 NAME			
STREET ADDRESS			5.3 STREET ADORESS	\		-
CITY-ST-ZIP		\	5.4 CITY-ST-ZIP		\	ľ
TITLE		DELETE	6,1 TITLE		☐ Change ☐ /	Addition
NAME			6.2 NAME			
STREET ADDRESS	ang fing in the control of the con		6.3 STREET ADDRESS		\	ĺ
	A CONTRACTOR OF THE CONTRACTOR					- 1

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.

SIGNATURE:

1/21/99 305-470-0181