FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$86502

PINTO INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

3920 N.W. 2ND STREET

2020 N.W. 2ND STREET

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90059 011 ***150.00



AIAMI FL 33126		MAMI FL 33126			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					10/10/1991		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	App	lied For
7493 N.W. 8 STREET		26			65-0309413	Not	Applicable_
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 ∧	,
2		27			3. Certificate of Status Desired	Fee Red	quired
City & State		City & State			6. Election Campaign Financing	\$5.00	
3 MIAMI		28			Trust Fund Contribution	Added to	Fees
Zip Country		Zip Country			8. This corporation owes the current year intangible Personal Property Tax. ☑ Yes □ No		
4 3312		29 30	0		Personal Property Tax. 10. Name and Address of New Registered Ag		1140
	9. Name and Address of Current F	Registered Agent		1 Name	10. Name and Address of New Registered Ag		
2112	NAMA IDAAA A		}`	Name			
)ana, irma a n.w. 2nd street		Ε	2 Street A	ddress (P.O. Box Number is Not Acceptable)		
	N FL 33126		-	3			 -{
MIM	M FL 33126]`	"	· · · · · · · · · · · · · · · · · · ·		
			8	4 City	EI	85 Zip C	ode , ,
					or existing submits this statement for the number of ch	anging its	registered
office or re	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida. Such change was autr	norizea i	y me corpor	orporation submits this statement for the purpose of chation's board of directors. I hereby accept the appointr	nent as reg	gistered
SIGNATURE		MOTE D	naintouna A	ant cionatura can	quired when reinstating) DATE		
	Signature, typed or printed name of registered agent a OFFICERS AND		13.	Jent Signature red	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
12. TITLE	D OTTIOCKS AND	[] DELETE	1.1 TITL			Change	Addition
NAME	BANEGAS, FERNANDO -A-		1.2 NAM	E	BANEGAS, FERNANDO		ļ
	DAMEGAS, I CHIMIDO A			EET ADDRESS			{
STREET ADDRESS				-ST-ZIP			J
CITY-ST-ZIP	MIAMI FL 33126	DELETE	2.1 TITL			Change	Addition
NAME	PINTO, HUGO		2.2 NAM	e			l
				EET ADDRESS			ì
STREET ADDRESS	MIAMI FL 33126			/-ST-ZIP		·	<u> </u>
TITLE	DPTS	☐ DELETE	3.1 TITL			Change	☐ Addition
NAME	SALDANA, IRMA A		3 2 NAM	E .			ļ
STREET ADDRESS	3920 N.W. 2ND STREET		3.3 STR	EET ADDRESS			-
CITY-ST-ZIP	MIAMI FL 33126		3.4. CIT	Y-ST-ZIP			
TITLE	INICARR VE GOVEO	☐ DELETE	4.1 TITL	E		☐ Change	Addition
NAME			4. 2 NA	AE			Į.
STREET ADDRESS			4.3 STR	EET ADDRESS			{
CITY-ST-ZIP			4.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	5.1 TITL	E.		Change	Addition
NAME			5.2 NAM	ie			}
STREET ADDRESS			5.3 STR	EET ADDRESS			
CITY-ST-ZIP			5.4 CITY	ST-ZIP			
TITLE		☐ DELETE	6.1 TITL	€	<u>-</u>	Change	Addition
NAME			6.2 NAM	E			ļ
STREET ADDRESS			6.3 STR	EET ADDRESS			
CITY-ST-ZIP			6.4 CITY	r-ST-ZIP			
					the state of the s	444 41 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 an attachment with an address, with all other like empowered.

SIGNATURE:

IRMA A. SALDANA OF SIGNING OFFICER OR DIRECTOR

02/24/99

(305) 260-0406