FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

		_	_		
DOCU	Μ	Ε	Ν	Т	#

S87565

(5)

Mailing Address

1. Corporation Name

Principal Place of Business

MEDINA INTERNATIONAL, CORP.

|--|

5981 EAST (HIALEAH FL		5981 EAST 6 AVE. HIALEAH FL 33013							
						3. Date Incorporated or Qualified 10/14/1991	3a. Date	of Last I 0/05/ *	
2. Principal Plac	ce of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26				65-0290841			Not Applicable
Suite, Apt #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution		Add	00 May Be ed to Fees
Z ₁ p	Country 25	Ζφ 29	Goun 30	itry		This corporation has liability for in Florida Statutes Yes		c under	s 199.032,
	g. Name and Address of Currer	- 				10. Name and Address of New R	egistered A	gent	
			1	81	Name				
MEDIN/ 5981 E	A, MIRIAM		ī	82	Street Addre	ss (P.O. Box Number is Not Acceptab	le)		
	H FL 33013		-	83					
			ļī	84	City		FL	85	Zip Code
CIONIATURE	Signature, Typed or printed that is of myristers Litauris				signature required	of directors. Thereby accept the approximation residency. ADDITIONS/CHANGES TO OFF	DATE	· - ·	
TITLE	DP	DELETE	1 1 11	IL f				Change	
NAME	MEDINA, LUIS H.		1.2 NA	M:					
STREET ADDRESS	5981 EAST 6 AVE		1351	REET A	ADDRESS				
CITY - ST - ZIP	HIALEAH FL		1401	Y-S [‡]	- 7:P		<u></u>		
TITLE	DVT	☐ DELETE	2 1 101	16			[Chang	e
NAME	MEDINA, MIRIAM M.		2.2 NA						
STREET ADDRESS	5981 E. 6 AVE.				ADDRESS				
CITY - ST - ZIP	HIALEAH FL	☐ DELETE	2 4 C I		1 - Z(F)			7 Chang	e Addition
TITLE	DS Medina, Maribel C.		3 2 NA				_	_	_
NAME STREET ADDRESS	5981 E. 6.AVE		II.		ADDRESS				
CITY-ST-ZIP	HIALEAH FL		3 4 CH						
TITLE	THE VALUE OF THE	☐ DELETE	4 1 1					Chang	e 🔲 Addition
NAME			4.2 NA	ME					
STREET ADDRESS			43.81	K(EL)	ADDRESS				
CITY-ST-ZIP			44 01		I - 21F			7.05.	FT 6445
TITLE		☐ DELETE	5 11'				Į.	Chang	ge 🔲 Addition
NAME			5.2 NA						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIF		ET per ere	5.4 CI		T - 7IP			7 Chang	ne Addit.on
TITLE		DELETE	6 1 11				ι	_1 CHRIS	jo
NAME			6 2 NA	/ME					

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)(k). 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 TONO WILLOW MINIAM-MEDINA 4-30-24

6.3 STHEET ADDRESS

STREET ADDRESS

CITY - ST - ZIP