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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

AURIC INTERNATIONAL, INC.

(9)

FILED Apr 16 1997 8:00am Secretary of State



,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Principal Place of Business		Mailing Address					
2 S BISCAYNE	BLVD.	P.O. OBX 330519					
#1890		MIAMI FL 33233					
MIAMI FL 3313 US	11	US			3. Date Incorporated or Qualified	3a. Date of Last Repor	
					01/24/1992	02/27/1996	"
	ace of Business	2a. Mailing Address			4. FET Number	Applie	dfor
21		26		5. Certificate of Status Desired 38.75		plicable	
Suite, Apt. #, etc.		Suite. Apt. #, etc					
22 City & State		City & State		Fee Ri			
23		28		6. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Country		8. This corporation has liability for in	all amounts are suit to the	- 4
24	25	29	30		Florida Statutes	Yes 🔲 No	
	9. Name and Address of Current	Registered Agent		,	10. Name and Address of New Rec	Jistered Agent	
	CANO, DOMINICK J.		81	Name			
	OUTH BISCAYNE BLVD.		82	Street Add	ress (P.O. Box Number is Not Acceptab	!e)	
1880	•		83				
, MIAI	MI FL 33131		63				
			84	City		FL 85 Zip Code	e
11. Pursuant t	to the provisions of Sections 007.05.02	and 607 1508 Florida Statute	.] Sthe above	named.com	poration submits this statement for the n	 	gistered
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 Horida, 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.							
ľ	m tamiliar with, and accept the obligat	ions of, Section 607.0906, FIO	rida Statutes	5.			
SIGNATURE	Signature, typed or printed name of registered agent	and the diapplicable (NOT	Hegistered Ago	nt signaturi, rega	rcd wher, remstating)	DÁIL	
12.	OFLICERS AND	DIRECTORS	13.		ADDITIONS/CHĀNGES TO OFFIC		
TITLE	D	[] DELFTE	1.1 THE			Change	Addition
NAME	TOSCANO, DOMINICK J.		1.2 NAME				
STREET ADDRESS 2 SOUTH BISCAYNE BLVD., #		880	1.3 STRE⊱L ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY - S	1 - 706			
TITLE		□ DETLIE	2.1 1:11#			L Change L	J Addition
NAME STREET ADDRESS			2.2 NAME 2.3 STREET	ADVD: CC			
ŀ			2.4 CHY-S				
CITY-ST-ZIP TITLE		DELFTE	3.1 1/11	Di-/ii		Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CHY- S				
TITLE		☐ DELETE	4.1 TIFLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CHTY-ST-ZIP			4.4 CITY - S	1 - 74º			41,000
TITLE		DELETE	5.1 10116			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET				
CITY-ST-ZIP TITLE		DELETE	5.4 GDY-S 6.1 TALE	1-711		Change	Addition
NAMÉ		∟ bittii	G 2 NAME			Onango	רטוופטה נ
STREET ADORESS			6.3 \$185E1	Annhess			
CITY-\$T-ZIP			6.4 CHY-S	Į.			
14 I do bosol	ar corlide that the information considered	with this films device not enrolling	for the eve	rostion readou	d in Scotion 110 07/3Vi). Elevida Statutes	Literature exercise that the	

not necessary that the information supplied with this hinting 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 (\$r\text{if changed, or on an attackment with an address.})