SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 31 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V45476** **(1)**

1. Corporation Name
C.I.S. INTERNATIONAL INC.

Principal Place of Business	Mailing Address
~~8296 WESTERN WAY CIR~~ ~~D 2~~ ~~JACKSONVILLE FL 32256~~ ~~US~~	3000 UNIVERSITY BLVD. SOUTH #40 JACKSONVILLE FL 32216 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/23/1992
3a. Date of Last Report: 09/02/1994

2. Principal Place of Business
21: 3734 W. CENTURY BLVD
Suite, Apt. #, etc. 22: # 6
City & State 23: INGLEWOOD, CA
Zip 24: 90303 Country 25: USA

2a. Mailing Address
26: 415 HERONDO ST. #367
Suite, Apt. #, etc. 27: #367
City & State 28: HERMOSA BEACH, CA
Zip 29: 90254 Country 30:

4. FEI Number: 59-3135202 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SAMARASINGHE, CHARITHA
3800 UNIVERSITY BLVD. S
~~#40~~ #35
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent

81 Name: CHARITHA. I. SAMARASINGHE
82 Street Address (P.O. Box Number is Not Acceptable): 3800 UNIVERSITY BLVD. S. #35
83:
84 City: JACKSONVILLE FL 85 Zip Code: 32216

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: Charitha I Samarasinghe CHARITHA. I. SAMARASINGHE 7/20/95
*Signature, Typed or Printed Name of Registered Agent and Date of Acceptance (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE		☐ Change ☐ Addition
NAME	SAMARASINGHE, CHARITHA	12 NAME		
STREET ADDRESS	3800 UNIVERSITY BLVD. SOUTH ~~#35~~	13 STREET ADDRESS		
CITY ST ZIP	JACKSONVILLE FL 32216	14 CITY ST ZIP		
TITLE	D	21 TITLE		☐ Change ☐ Addition
NAME	WITTEWEERA, CAVINDA	22 NAME		
STREET ADDRESS	3800 UNIVERSITY BLVD. SOUTH ~~#35~~	23 STREET ADDRESS		
CITY ST ZIP	JACKSONVILLE FL 32216	24 CITY ST ZIP		
TITLE	D	31 TITLE		☐ Change ☐ Addition
NAME	RANDENIYA, MEUAN	32 NAME		
STREET ADDRESS	3135 WEST 181 ST.	33 STREET ADDRESS		
CITY ST ZIP	TORRACE CA 90504	34 CITY ST ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

CR2E034 (3/95)

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)(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 added on an attachment with an address.

8002475689

SIGNATURE: Charitha I Samarasinghe CHARITHA. I. SAMARASINGHE 7/20/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

0120106 FP