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

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90041 017 ***158.75

DOCUMENT # **V49520**

1. Corporation Name

PEBEX INTERNATIONAL INC.

Principal Place	of Business	Mailing Address		
8343 NW 66 ST		8343 NW 66 ST		
MIAMI FL 33166		MIAMI FL 33166	,	DO NOT WRITE IN THIS SPACE
US	موادات الشعويات ومساعة والمتويي	_ US		3. Date Incorporated or Qualifed
				07/09/1992
2 Principal Dis	ace of Business	2a. Mailing Address	,	4. FEI Number Applied For
Z. Pillicipai Pi	ace of business	⊢ , *		65-0346586 Not Applicable
Suite, Apt. #	H atc	Suite, Apt. #, etc.		\$8.75 Additional
Suite, Apt. 7	F, BIO.	27		5. Certifcate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing S5.00 May Be
23	•	28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible
24	25	29 30	1	Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Current	1201		10. Name and Address of New Registered Agent
			81 Name	LAVIDSA, Fernando
LAVIO	osa, fernando		00 00	LAVIDSA Fernando t Address (P.O. Box Number is Not Acceptable)
8377	NW 66 STREET		82 Street	(Address (P.O. Box Number is Not Acceptable)
MIAN	II FL 33166		83	1221
				1321 NW 144 AVE
			84 City	embroké Pinês FL 85 Zip Code 33028
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				
	Signature, typed or printed name of registered agen			e required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		D DIRECTORS	13.	P Change Addition
TITLE	PELLICARTE IOCE DANON			REWLATE, JOSE RAMON
NAME	PELUCARTE, JOSE RAMON		12 NAME	
STREET ADDRESS	8377 NW 66 STREET	·	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33166	☐ DELETE	1.4 CITY-ST-ZIP	Miami, FC 33185
TITLE	S	EJ DELETE	2.1 TITLE	LAVIOSA, Fernando
NAME	LAVIOSA, FERNANDO		2.2 NAME	I man the supplied Auf.
STREET ADORESS	8377 NW 66 STREET		2.3 STREET ADDRESS	REMBROKE RIVES. FL 33028
CITY-ST-ZIP	MIAMI FL 33166		2.4 CITY-ST-ZIP	Change Addition
TITLE		☐ DELETE	3.1 TITLE	- Change - Accused
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	s
CITY-ST-ZIP		FI OCI ETE	3.4. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		□ DELETE	4.1 TITLE	
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADORESS	S
CITY-ST-ZIP		[] priett	4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	· ·
STREET ADDRESS			5.3 STREET ADDRESS	8
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Thomas to see the
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	s · (
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

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 trusted impowered 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:

NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #