PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V50704

MASTER MARKETING INTERNATIONAL, INC.

(8)

Principal Place of Business

Mailing Address

2055 NW 79TH AVE. MIAMI FL 33122

2055 NW 78TH AVE. MIAMI FL 33122-1614 APPROVED AND

1997 OCT 23 PM 12: 33

SECRETARY OF STATE TALLAHASSEE. FLORIDA



					3. Date Incorporated or Qualified 3a. Date of Last 10/07/1996	Date of Last Report)/07/1996		
	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	applied For		
21 10425 SW88 STREET		26 PO BOX 651035) 	65-0408896 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			L & L'erribcate of Status Degree L. L.	Additional		
22 Suite C110		27			Fee F	Required		
City & State		City & State 28 Miami Flonida		<i>(</i>		May Be		
23 Mian						l to Fees		
Zip	Country	29 33265-1035 3	Country	y	8. This corporation has liability for intangible tax under	s. 199.032,		
24 <i>33/7</i>			<u>oj</u>		Florida Statutes Yes No 10. Name and Address of New Registered Agent			
Name and Address of Current Registered Agent DOMEDO DATE ID					81 Name			
ROMERO, RAUL JR.				VI Tuero				
10425 S.W. 88 STREET			82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE C110			83					
MIAMI FL 33176			83					
			84	City	FL 85 Zip	Code		
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 tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.								
SIGNATURE Signature, What or printed name of registered agent and title if applicable (NOT) Registered Agent signature required when reinstating) DATE DATE								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO			
TITLE	P	DELETE	1.1 TITLE	i	Change	Addition		
NAME	ROMEO, RAUL JR.		1.2 NAME		_	1		
STREET ADDRESS	10425 SW 88 ST., #C110		1.3 STREET ADDRESS		. Δ Ω	W		
CITY-ST-ZIP	MIAMI FL 33176			S1 - ZIP	0 49800			
TITLE	V	DELETE	21 THEE	J	REINSTATEMENT	Addition		
NAME	ROMEO, MARGARITA R		2.2 NAME	ĺ	VEHAPIWIEMEN 1			
STREET ADDRESS			2.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33176		2 4 CITY-	ST-ZiP				
TITLE		☐ DELETE	3.1 TITLE		☐ Change	Addition		
NAME			3.2 NAME	Į.	200002332832 -10/29/9701093	!9		
STREET ADDRESS			3.3 STREET	ADDRESS	-10/29/9701093	-008		
CITY-ST-ZIP .			34. CITY-:	S1-ZIP	*****75()。(1) *****	<u> (20.00 </u>		
TITLE 🧣			4 1 TITLE	ĺ	☐ Change	Addition		
NAME			4. 2 NAME	ļ	ı	Į		
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY - S	17-71P				
TITLE		DELETE 5.11			Change	Addition		
NAME			52 NAME	ì		ì		
STREET ADDRESS			5.3 STREET	ADDRESS		ĺ		
CITY-ST-ZIP			5.4 CITY - S	31 - ZIP				
TITLE		□ DELE1E	6.1 TITLE		Change	Addition		
NAME			6.2 NAME			ļ		
STREET ADDRESS			63 STREET	ADDRESS		İ		
CITY-ST-ZIP			6.4 CiTY - S	1-7IP		ŀ		

I do 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 eath; 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.