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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	500 KT 185	2.110.10.1	CORPORATI	ONS				
OCU Corporatio	MENT # V53	051	(1)						
	BBEAN SALES INTERNA	ATIONAL INC	•						
OAH	POENI ONEEO HITEIHA	THORAL, INC	,,			I IBBH BIIBBH BIIBBH BIHBH BBIBH B	 	H BIBII BHBII	ALAH WAWANA
·	e of Business	Mailing	g Address			1 10011 111001 01100 11111 00101 0	************	2:4:: 8:2:	41011 01011 1441
12505 S.W 99 AVE. MIAMI FL 33176). BOX 161822 NMI FL 33116-1822						
MINNI LE		ÜS							
						 Date Incorporated or Qualified 07/22/1992 		of Last Re 4/21/19	
Principal F	liace of Business	2a. Ma	ailing Address			4. FEI Number		' ' '	Applied For
		26				65-0349020			Not Applicable
Suite, Apt.	. #, etc	Su 	iite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & Stat		and a separate of	ty & State			6. Election Campaign Financing	, , , ,		May Be
	and the second of the second o	28				Trust Fund Contribution			to Fees
Zφ	Country	Zır.)	Country	,	8. This corporation has liability for		x under s	199.032,
	[25] 9. Name and Address of C	29 Current Registere	ed Agent	30		Florida Statutes Ye	Registered A	Agent	
				81	Name	10.			
	WILLIAM J., JR.			82	Street Addr	ress (P.O. Box Number is Not Accepta	able)		
	S.W. 99TH AVE.				Olived Flags	1000 (101000)			
MIAM	FL 33176			83					
					I				Code
				84	City		P~ 1	85 Zip	Code
. Porscant	to the provisions of Sections 607	0502 and 607 15	08 Florida Statut	es the above.	named corner	ration submits this statement for the o	FL.	naina ita r	paintared offic
Or recusto	ired agent, or both, in the State of	d Florida, Such chi	anna was authoriz	es, the above or	named corner	ration submits this statement for the p ind of directors. I hereby accept the ap	urnoco of cha	naina ita r	paintared office
or registe familiär w	to the provisions of Sections 637 gred agent, or both, in the State of with, and accept the obligations of,	d Florida, Such chi	anna was authoriz	es, the above or	named corner	ration submits this statement for the p rd of directors. I hereby accept the ap	urnoco of cha	naina ita r	paintered offic
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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.

SIGNATURE:

FICER OR DIRECTOR

2/27/96