

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION
 ANNUAL REPORT
 1996



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

FILED

96 DEC 13 AM 11:20

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



DOCUMENT # V55977 (5)
 1. Corporation Name

INTERNATIONAL INVESTMENT GROUP INC.

Principal Place of Business Mailing Address
 7550 HANSON STREET STE. 140 ORLANDO FL 32819 US
 7550 HANSON STREET STE. 140 ORLANDO FL 32819 US

REINSTATEMENT *910*

3. Date Incorporated or Qualified 07/24/1992
 3a. Date of Last Report 08/25/1995

2. Principal Place of Business 2a. Mailing Address
 21 7550 HINSON STREET 28 7550 HINSON STREET
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 22 STE 14D 27 STE 14D
 City & State City & State
 23 ORLANDO FL 28 ORLANDO FL
 Zip Country Zip Country
 24 32819 25 USA 29 32819 30 USA

4. FEI Number 59-3133091 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
 HALO, MOUNERA
 7550 HANSON STREET
 STE. 140
 ORLANDO FL 32819

10. Name and Address of New Registered Agent
 81 Name MOUNERA HALO
 82 Street Address (P.O. Box Number Is Not Acceptable) 7550 HINSON STREET
 83 STE 14D
 84 City ORLANDO FL 32819 FL 85 Zip Code 32819

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 *Mounera Halo* DATE 10-31/96
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALO, MOUNERA	1.2 NAME	HALO, MOUNERA
STREET ADDRESS	7550 HANSON ST SUITE 14D	1.3 STREET ADDRESS	7550 HINSON ST, SUITE 14D
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	ORLANDO FL 32819
TITLE	DPST <input type="checkbox"/> DELETE	2.1 TITLE	DPST <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALO, MOUNERA	2.2 NAME	HALO MOUNERA
STREET ADDRESS	7550 HANSON ST., STE 14D	2.3 STREET ADDRESS	7550 HINSON ST, STE 14D
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	ORLANDO FL 32819
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 -12/17/96--01093--005 Addition
 ****383.75 ****383.75
10-31-96

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)(k), 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Mounera Halo* DATE 10-31/96
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR MOUNERA HALO DAYTIME PHONE # 407 396-7750