

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

DOCUMENT # **P93000031953 (1)**

**HENRIQUE PFEFFER INTERNATIONAL, INC.**

95 MAY 11 AM 8:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Principal Office of Corporation <b>5757 BLUE LAGOON DR SUITE 140 MIAMI FL 33126</b>		2a. Mailing Address <b>5757 BLUE LAGOON DR SUITE 140 MIAMI FL 33126</b>		3. State Incorporation or Qualification <b>05/03/1993</b>	3a. Date of Last Report <b>04/11/1994</b>
2. Principal Office of Business <b>21</b>	2b. Mailing Address <b>26</b>	4. FEI Number <b>65-0409835</b>		Applied For Not Applicable	
22	27	5. Certificate of Status Desired <input checked="" type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
23	28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
24	25	29	30	8. This corporation has liability for interest on tax under S. 199(3)? Florida Statute: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>CASTILLO B, ALVARO ESQ 1533 SUNSET DRIVE SUITE 201 MIAMI FL 33143</b>				10. Name and Address of New Registered Agent	
				B1	Name
				B2	Street Address (If C- Box Number is Not Applicable)
				B3	
				B4	City
				B5	Zip Code

11. Pursuant to the provisions of Sections 607.014(1) and 607.1408, 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 this appointment as registered agent. I am not a wife, and do not accept the obligations of Sections 607.014(2)(b), Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGED BY TO OFFICERS AND DIRECTORS BY 12:	
NAME	<b>D PFEFFER, ROBERTO 5757 BLUE LAGOON DR SUITE 201 MIAMI FL 33126</b>	1. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>D PFEFFER, ABRAHAM RICARD 5757 BLUE LAGOON DRIVE SUITE 140 MIAMI FL</b>	2. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		7. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		8. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 339.07(2)(b), Florida Statutes. I further certify that the information included in 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 1, or Block 10 of a transfer, or on an affidavit with an address.

SIGNATURE: \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT OR DIRECTOR

May 07/95