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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 650289

1. Corporation Name

COSTEX CORPORATION

Principal Place of Business

6100 N.W. 77 COURT
MIAMI FL 33166
US

Mailing Address

6100 N.W. 77 COURT
MIAMI FL 33166
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/07/1980

4. FEI Number

59-1963036

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional****Fee Required**8. Election Campaign Financing
Trust Fund Contribution**\$5.00 May Be**
Added to Fees9. This corporation owes the current year intangible
Personal Property Tax.

Yes



No

10. Name and Address of New Registered Agent

81 Name

JOSE A. NAVARRO, ESQ.

82 Street Address (P.O. Box Number is Not Acceptable)

7950 W. FLAGLER STREET

83

SUITE 104

84 City

MIAMI**FL**

85 Zip Code

33144

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 agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/29/99

12. OFFICERS AND DIRECTORS

1.1 TITLE ☐ DELETE

NAME

ST**URIBE, TERESA**

STREET ADDRESS

407 N.W. 128 AVE.

CITY-ST-ZIP

MIAMI FL1.2 TITLE ☐ DELETE

NAME

P**URIBE, GILBERTO C**

STREET ADDRESS

407 N.W. 128 AVE.

CITY-ST-ZIP

MIAMI FL1.3 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.4 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.5 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.6 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.7 TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Gilberto Uribe**2/18/99****305-592 9769**

CR2E034 (11/98)