

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **H41693 (3)**

1. Corporation Name
LIMATUB IMPORT - EXPORT, INC.



Principal Place of Business: **3590 S ST RD. 7 SUITE 16 MIRAMAR FL 33023**
Mailing Address: **3590 S ST RD. 7 SUITE 16 MIRAMAR FL 33023**

3. Date Incorporated or Qualified: **02/07/1985**
3a. Date of Last Report: **02/28/1995**

2. Principal Place of Business
21 **5450 S. State Rd 7**
Suite, Apt. #, etc.: **Bay 16**
City & State: **Hollywood FL**
Zip: **33314** Country: **USA**
22 **Bay 16**
City & State: **Hollywood FL**
Zip: **33314** Country: **USA**
23 **Hollywood FL**
Zip: **33314** Country: **USA**
24 **33314** 25 **USA** 26 **5450 S. State Rd 7**
Suite, Apt. #, etc.: **Bay 31**
City & State: **Hollywood FL**
Zip: **33314** Country: **USA**

4. FEI Number: **59-2495575**
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

10. Name and Address of New Registered Agent

PEREZ, ALEJANDRO R
~~**6112 S.W. 95TH COURT**~~ **MIRAMAR FL 33023**
→ Address change

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): **3490 Southern Orchard Rd**
83
84 City: **DAVIE** FL 85 Zip Code: **33328**

11. Pursuant to the provisions of Sections 607.002 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: **Alejandro R. Perez** 3/29/96
NOTE: Registered Agent signature returns when re-issuing.

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	PEREZ, ALEJANDRO R.	
STREET ADDRESS	6112 S.W. 35 COURT	
CITY - ST - ZIP	MIRAMAR FL.	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	3490 Southern Orchard Rd
1.4 CITY - ST - ZIP	DAVIE FL 33328
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE: **Alejandro R. Perez** 3/29/96 954 583 0055
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)