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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K56631

REGENO	Y IMPORT & EXPORT, INC								
Principal Place	of Rueinage	Mailing Address				┨	† 1881 † 1811 † 1811 † 1811 † 1811 † 1818 † 1818 † 1818 † 1818 † 1818 † 1818 † 1818 † 1818 † 1818 †	 	0101)
Principal Place of Business Mailing Address 9940 S.W. 168TH TERR 9940 S.W. 168TH TERR MIAMI FL 33157 US Mailing Address Milling Address 9940 S.W. 168TH TERR MIAMI FL 33157 US						DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed			
						*	01/09/1989		
2. Principal Place of Business 2a. Mailing Address							FEI Number	Ap	plied For
21 26							65-0101286		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				ځې شه شم			Certificate of Status Desired	\$8.75 / Fee Re	
22 27 City & State City & State					·	6	Election Campaign Financing	\$5.00	
28						\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Trust Fund Contribution	_ Added 1	
Zip	Country Zip Cou			v. This corporation of the art of the series of			□ No		
24	25		<u>o </u>			40	Personal Property Tax. Name and Address of New Registered		UNO .
	9. Name and Address of Current	t Kegistered Agent		81	Name	10.	Hame and Address of New Registered	1 Main	···
PREVITI, PETER 5825 SUNSET DR STE 210 MIAMI FL 33143				82		ess (P	P.O. Box Number is Not Acceptable)		
			ļ						-
			Ì	84	City		F	85 Zip (Code
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	COTE D	- Watered	Amous	t signature required t	udan r	einstating) DATE		
12.	OFFICERS AN		13.	- vgaisi	i signature required		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	D STRUCKS AIR	☐ DELETE	1.1 111	LE.	ı,	<u>-</u>		Change	Addition
NAME	FONGYEE, LEOPOLD	_	1.2 NA	ME					
STREET ADDRESS	2040 OM CONT. TERM		1.3 ST	1.3 STREET ADDRESS					l
CITY-ST-ZIP	A DI A D DI TO			1.4 CITY-ST-ZIP					
TITLE				2.1 TITLE				Change	Addition
NAME	FONGYEE, RODERICK		2.2 NA	ME					
STREET ADDRESS	20.40 AM 400TH TESS		23 577	2.3 STREET ADDRESS					j
CITY-ST-ZIP			2. 4 CII	ry-si	T-ZIP		·		· i
TITLE	S	☐ DELETE	3.1 TIT					Change	☐ Addition
NAME	HUGH, SANDRA		3.2 NA	ME					
STREET ADDRESS	9940 SW 168TH TERR		3.3 STREE		ADDRESS				
CITY-\$T-ZIP	MIAMI FL		3.4. CITY+ST-		J				ļ
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4.2 NAME						
STREET ADDRESS			E .		ADDRESS				
CITY-ST-ZIP				4 CITY-ST-ZIP					
TITLE		☐ DELETE	5.1 TITI					Change	Addition
NAME		ww · -	5.2 NA					_ *	-
STREET ADDRESS					ADDRESS		,		
CITY ST. ZIP			5.4 CIT						ļ

1 100 000 to 2 000 and 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.

6.1 TITLE

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRÉSS

CITY-ST-ZIP

TITLE

OELETE

Change

☐ Addition