

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L67720** (7)

1. Corporation Name
EXPORT-IMPORT CONSULTANTS AND SERVICES, INC.



Principal Place of Business: **630 HAMPTON LANE MIAMI FL 33149**
Mailing Address: **630 HAMPTON LANE MIAMI FL 33149**

3. Date Incorporated or Qualified: **04/24/1990**
3a. Date of Last Report: **01/30/1995**
4. FEI Number: **65-0339458**
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

2. Principal Place of Business: 21, 22, 23, 24
2a. Mailing Address: 26, 27, 28, 29, 30

9. Name and Address of Current Registered Agent

**DE LA CAMARA, ROSA M.
6161 BLUE LAGOON DRIVE #250
MIAMI FL 33126**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0712 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 607.0705, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS

12-1 TITLE	P	<input type="checkbox"/> DELETE
12-2 NAME	DE LA CAMARA, FRANCISCO	
12-3 STREET ADDRESS	630 HAMPTON LANE	
12-4 CITY, ST, ZIP	MIAMI FL	
12-5 TITLE	S	<input type="checkbox"/> DELETE
12-6 NAME	DE LA CAMARA, ROSA A.	
12-7 STREET ADDRESS	630 HAMPTON LANE	
12-8 CITY, ST, ZIP	MIAMI FL	
12-9 TITLE		<input type="checkbox"/> DELETE
12-10 NAME		
12-11 STREET ADDRESS		
12-12 CITY, ST, ZIP		
12-13 TITLE		<input type="checkbox"/> DELETE
12-14 NAME		
12-15 STREET ADDRESS		
12-16 CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13-1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-2 NAME	
13-3 STREET ADDRESS	
13-4 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-5 TITLE	
13-6 NAME	
13-7 STREET ADDRESS	
13-8 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-9 TITLE	
13-10 NAME	
13-11 STREET ADDRESS	
13-12 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13-13 TITLE	
13-14 NAME	
13-15 STREET ADDRESS	
13-16 CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied herein by this corporation, furnished and does not qualify for the exemption stated in Section 119.071(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. 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 change is or on an attachment with an address.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-23-96 (305)361-9730

CR2E034 (12/95)