

— AMENDMENT

FILED

Sep 03 1998 8:00am  
Secretary of State

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **L95000000135**  
 1. Corporation Name  
**U.S. KOLON EXPORT LIMITED COMPANY**

Principal Place of Business <b>7400 NW 7 ST. #105 MIAMI, FL. 33126</b>	Mailing Address <b>7400 NW 7 ST. #105 MIAMI, FL. 33126</b>
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DO NOT WRITE IN THIS SPACE  
 3. Date Incorporated or Qualified  
**02-17-95**

21. Principal Place of Business Scale, Apt. #, etc.	22. City & State	23. Zip	24. Country	25. Country	26. Mailing Address Suite, Apt. #, etc.	27. City & State	28. Zip	29. Country	30. Country
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4. FEI Number <b>65-0556629</b>	Applied For Not Applicable
5. Certificate of Status Desired: <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**SAMAAN GEORGE**  
**7400 NW 7 ST.**  
**#105**  
**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  
 FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0002 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]* DATE: **8/26/98**

12. OFFICERS AND DIRECTORS

TITLE: <b>VPS</b>	NAME: <b>SAMAAN, GEORGE</b>	<input type="checkbox"/> DELETE
STREET ADDRESS: <b>94 PALM AVE.</b>	CITY-STATE-ZIP: <b>MIA BEA, FL.</b>	
TITLE: <b>VP</b>	NAME: <b>RULIDO, ANTONIO</b>	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS: <b>4705 NW 7 ST. #405</b>	CITY-STATE-ZIP: <b>MIAMI, FL.</b>	
TITLE: <b>VPT</b>	NAME: <b>PRADO, FRANCISCO S</b>	<input type="checkbox"/> DELETE
STREET ADDRESS: <b>7400 NW 7 ST. #105</b>	CITY-STATE-ZIP: <b>MIAMI, FL 33126</b>	
TITLE: <b>P.</b>	NAME: <b>ABBOUD, ABDOU</b>	<input type="checkbox"/> DELETE
STREET ADDRESS: <b>7400 NW 7 ST. #105</b>	CITY-STATE-ZIP: <b>MIA FL 33126</b>	
TITLE: <b></b>	NAME: <b></b>	<input type="checkbox"/> DELETE
STREET ADDRESS: <b></b>	CITY-STATE-ZIP: <b></b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: <b>VPS</b>	NAME: <b>SAMAAN, GEORGE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME: <b>SAMAAN, GEORGE</b>	1.3 STREET ADDRESS: <b>7400 NW 7 ST. #105</b>	
1.4 CITY-STATE-ZIP: <b>MIAMI, FL 33126</b>	2.1 TITLE: <b></b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME: <b></b>	2.3 STREET ADDRESS: <b></b>	
2.4 CITY-STATE-ZIP: <b></b>	3.1 TITLE: <b></b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME: <b></b>	3.3 STREET ADDRESS: <b></b>	
3.4 CITY-STATE-ZIP: <b></b>	4.1 TITLE: <b></b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME: <b></b>	4.3 STREET ADDRESS: <b></b>	
4.4 CITY-STATE-ZIP: <b></b>	5.1 TITLE: <b></b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME: <b></b>	5.3 STREET ADDRESS: <b></b>	
5.4 CITY-STATE-ZIP: <b></b>	6.1 TITLE: <b></b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME: <b></b>	6.3 STREET ADDRESS: <b></b>	
6.4 CITY-STATE-ZIP: <b></b>	6.4 CITY-STATE-ZIP: <b></b>	

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14. I declare 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 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 12 or Block 13 if change of, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE: **8/26/98** (305) 265-0440