

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000083602 (0)

1. Corporation Name

AMP IMPORT & EXPORT, INC.

Principal Place of Business

601 BRICKELL KEY DRIVE
SUITE 501
MIAMI FL 33131-2651

Mailing Address

601 BRICKELL KEY DRIVE
SUITE 501
MIAMI FL 33131-2651

APPROVED
AND
FILED

1995 MAY -1 AM 11: 55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100001482091
-05/10/95--01015--007
****200.00 ****200.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/09/1994

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

4. FEI Number

Applied for

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Does corporation have liability for franchise fees under Chapter 190, Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

GUTIERREZ, RENALDY J
601 BRICKELL KEY DRIVE
SUITE 501
MIAMI FL 33131-2651

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 607.0502 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 of Agent or Person Submitting Report) (Signature of Registered Agent required after first filing)

12. OFFICERS AND DIRECTORS

12a. NAME
D MERA, ALFONSO
12b. STREET ADDRESS
AVE. 27 DE FEBRERO NO. 266 4TA. PLANTA
12c. CITY, ST, ZIP
SANTO DOMINGO, REPUBLICA DOM

12d. TITLE
Assistant Secretary
12e. NAME
Renaldy J. Gutierrez
12f. STREET ADDRESS
601 Brickell Key Drive, Ste. 501
12g. CITY, ST, ZIP
Miami, FL 33131-2651

12h. NAME
12i. STREET ADDRESS
12j. CITY, ST, ZIP

12k. NAME
12l. STREET ADDRESS
12m. CITY, ST, ZIP

12n. NAME
12o. STREET ADDRESS
12p. CITY, ST, ZIP

12q. NAME
12r. STREET ADDRESS
12s. CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13a. TITLE ☐ Change ☐ Addition

13b. NAME

13c. STREET ADDRESS

13d. CITY, ST, ZIP

13e. TITLE ☐ Change ☐ Addition

13f. NAME

13g. STREET ADDRESS

13h. CITY, ST, ZIP

13i. TITLE ☐ Change ☐ Addition

13j. NAME

13k. STREET ADDRESS

13l. CITY, ST, ZIP

13m. TITLE ☐ Change ☐ Addition

13n. NAME

13o. STREET ADDRESS

13p. CITY, ST, ZIP

13q. TITLE ☐ Change ☐ Addition

13r. NAME

13s. STREET ADDRESS

13t. CITY, ST, ZIP

13u. TITLE ☐ Change ☐ Addition

13v. NAME

13w. STREET ADDRESS

13x. CITY, ST, ZIP

13y. TITLE ☐ Change ☐ Addition

13z. NAME

13aa. STREET ADDRESS

13ab. CITY, ST, ZIP

14. I, the undersigned, certify that the information supplied with this filing is complete, true and correct, and does not contain any false or misleading information. I further certify that the information supplied on this annual report or supplementary 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 custodian empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of Block 13 of changes on an attachment with this address.

SIGNATURE:

(Signature of Officer or Director)
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

Assistant Secretary

4/28/95 (3-4) 577-4500