


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # P96000007334	
1. Entity Name IMPORT AND EXPORT SPECIALIZED EQUIPMENT AND SERVICES, INC.	

Principal Place of Business 12951 S.W. 80TH STREET MIAMI, FL 33183	Mailing Address 12951 S.W. 80TH STREET MIAMI, FL 33183
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04122004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0554850	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ALTAMIRANO, ARTURO
12951 S.W. 80TH STREET
MIAMI, FL 33183**

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

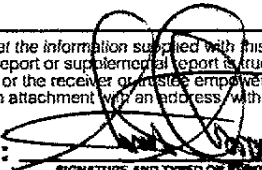
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOLINA, ANDRES L RAFAEL REBOLLAR NO. 56, COLONIA SAN MIGUEL C.P. 11850, MEXICO DF MEXICO,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOLINA, MARTIN RAFAEL REBOLLAR NO. 56, COLONIA SAN MIGUEL C.P. 11850, MEXICO DF MEXICO,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOLINA, ALEJANDRO G RAFAEL REBOLLAR NO. 56, COLONIA SAN MIGUEL C.P. 11850, MEXICO DF MEXICO,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALTAMIRANO, ARTURO 12951 S W 80 ST MIAMI, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000142636
04/30/04-80060-004 150.00

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **-ARTURO ALTAMIRANO** 4/27/04 305-385-7510

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #