FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business

7691 S.W. 102ND PLACE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V18925

(0)

Mailing Address 7631 S.W. 102ND PLACE

AXIOM IMPORT - EXPORT, CORP.

FILED										
Apr	18	1997	8:00am							
Se	cre	tary o	f State							



MIAMI FL 3317	73		MIAMI FL 3317	3-3960								
								Date Incorporated or Qualified 03/04/1992	3a. Date 05/0	of Last 1/1996	Report	
2. Principal P	lace of Busi	ness	2a. Mailing Ado	dress			4.	FEI Number			oplied For	
21			26					65-0318559			lot Applicable	
Suite, Apt. #, etc.			Suite, Apt	Suite, Apt #, etc.			5.	Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	e		City & State)			6.	Election Campaign Financing	_		May Be	
23			28					Trust Fund Contribution			to Fees	
Zip		Country	Zip	-	Country	/	8.	This corporation has liability for	r intangible ta 🎇 Yes 🔲		s. 199.032,	
24	0 Name	25	29 Current Registered Agent		30			Florida Statutes Name and Address of New R				
MAC	ONO, SALV		Current Hogistereo Ageni	·	81	Name	10.	Tulino and Addition of them It	ogiotorou za	g () 11		
		ND PLACE										
	MI FL 3317				82	Street	Address (F	P.O. Box Number is Not Accepta	ible)			
ITIPA	MI 1 E 00 11				83							
										· · · · · · · · · · · · · · · · · · ·		
					84	City			FL	85 Zip	Code	
11. Pursuant office or r agent. I a	to the provis registered ag im familiar w	sions of Sections 6 gent, or both, in th ith, and accept th	07.0502 and 607.1508, Flo e State of Florida. Such cha e obligations of, Section 60	rida Statute ange was au 7.0505, Flor	s, the abov uthorized by rida Statute	e-named y the corp s.	l corporatio poration's b	on submits this statement for the coard of directors. I hereby acce	purpose of copt the appoi	hanging ntment a	its registered s registered	
SIGNATURE	Constitute Access		lered agent and title if applicable	INICATO	: Registered Ag	and war above	soo read when	rejugation)	DATE			
12.	Signature, typod		RS AND DIRECTORS	(NOTE	13.	oni signature		ADDITIONS/CHANGES TO OFFI		DIRECTO	IBS IN 12	
TITLE	PD	- OTTIOE		DELETE	1.1 TULE		i – – –	10011010101010101010101010101		Change		
NAME	MAGNO,	SALVADOR			1.2 NAME							
STREET ADDRESS	7631 S.V	N. 102ND PLAC	E		1.3 STREET	ADDRESS						
CITY-ST-ZIP	MAMI FI	L			1.4 ČITY- S	81 - Z IP						
TITLE				DELETE	2 1 11TLE			<u>u</u>		Change	Addition	
NAME					2.2 NAME							
STREET ADDRESS					2 3 STREET	ADDRESS						
CITY - ST - ZIP					2 4 CITY-	ST-ZIP		···		_		
TITLE				DELETE	3111116				L	_] Change	☐ Addition	
NAME					3.2 NAME							
STREET ADDRESS					3 3 STREET							
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		DELETE	3.4. CITY -	\$1 - ZIP	ļ 		· · · · ·	Change	Addition	
TITLE				DELETE	4 1 TITLE				L	Change	☐ Addition	
NAME					4. 2 NAME	IDDOCCO						
STREET ADDRESS					4.3 STREET							
CITY-ST-2IP TITLE				DELETE	4.4 CHY-5 5.1 TITLE	51 - ZiP	 			Change	Addition	
NAME			.	DEEC.C	5.2 NAME				_	Change		
STREET ADDRESS	!				5.3 \$18EE1	ADDRESS						
CITY-ST-ZIP					5.4 CITY - S							
TITLE				DELETE	6.1 THILE	71.70	 	 	·	Change	Addition	
NAME					6.2 NAME				_			
STREET ADDRESS					6.3 STREET	ADDRESS	[
CITY-ST-ZIP					6.4 CITY - 5							

14. 1 do 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

MANATURE VI. Salard ordania

4-12-97 (305)373-23