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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

May 02 1997 8:00am

Secretary of State

DOCUMENT # P9300036618 (5) BRASIL CELLULAR IMPORT & EXPORT, INC.

Detector 1 Disc								
Principal Place of Business Mailing Address 2530 S.W. 19TH AVE. MIAMI FL 33133 MIAMI FL 33133-2402								
-					3. Date Incorporated or Qualified 05/20/1993		ale of Last R /02/1996	leport
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Ar	pplied For
Suite, Apt.	# etc	26 Suite, Apt. #, etc.		65-0410383			ot Applicable	
22	, n, otc.	27		5. Certificate of Status Desired		,	Additional equired	
City & Stat	te	City & State			6. Election Campaign Financing			May Be
23		28			Trust Fund Contribution			to Fees
- Zip	Country	Zip	Countr	у ,	8. This corporation has liability for			. 199.032,
24	25] 9, Name and Address of Curi	29 ant Registered Agent	30]			Yes		
SFA	RRANO, JOSE D	our unflatered whallf	81	Name	10. Name and Address of New Ro	gistered	Agent	
2530 S.W. 19TH AVE.								
	MI FL 33133		82	Street Add	dress (P.O. Box Number is Not Accepta	ole)		
			83					
			84	City			85 Zip (Code
				1		FL	_	
office or i	registered ago in Juliboth, in the Str am familiar with, right accept the ob	te of Ferida, Such change was ignitions of, 73 ation 607,0505, f	authorized b	y the corpora	rporation submits this statement for the ation's board of directors. I hereby acce	pt the any	pointment as	registered
	Signature, typ of or printed name of registered	agert and tille if nepticable (NC		on: signature requ	uired when reinstating)	DATE	- <u>-</u>	
12.	OFFICERS 7	DELETE	18. 1.1 101.0		ADDITIONS/CHANGES TO OFFI	CERS ANI		
NAME	SERRANO, JOSE D		1.7 NAME				Change	Addition
STREET ADDRESS	2530 S.W. 19TH AVE.			1 ADDRESS 1				
CITY-ST-ZIP	MIAMI FL 33133		14 CITY -					
TITLE		☐ DELFTE	211011				Change	Addition
NAME			22 NAME					
STREET ADDRESS			2 3 STREE	T ADDRESS				
TITLE		DELETE	2 4 CITY -	SI-7IP				···
NAME			3.1 TITLE 3.2 NAME				L Change	Addition
STREET ADDRESS				1 ADDRESS				
CITY-ST-ZIP			3.4. CITY-					
TITLE		DELETE	4.1 TILE	J. 20			Change	Addition
NAME			4. P NAME				Ť	•
STREET ADORESS			4.3 STR££	LADORESS				
CITY-ST-ZIP		——————————————————————————————————————	4.4 CHY-	\$1-7(P				
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME OTDOOR ADDOORS			5.2 NAME					
STREET ADDRESS				FADDRESS				
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - : 6.1 TO LE	SI · ZIP			☐ Change	Addition
NAME			6.2 NAME				onenge	IT3 Vogition
STREET ADDRESS				LADORESS				

14. I 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 12 or an attachment with an address.