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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 37326

(8)

**ALBERTO SALAZAR IMPORT EXPORT CORPORATION** 

ERPORT CORPORATION 7591 NW. 54 ST. MAMIFL 33166  EPROPATION 11/24/1970  2. Principal Place of Business 2. A. FEI Number    Not Applicable For   Not Applicable   Suile, Apt. #, etc.   Suile, Apt. #,										
Total NW Set St.   Total NW Se	Principal Plac	e of Business	Mailing Address					ILI AIRII BIRII EIRI	/I 400I	
2. Principal Place of Business   2e. Mailing Address   2e. Mailing Address   2e. Mailing Address   2e. Mailing Address   2e. Mol. Applied For Sulle, Apt. #, etc.   Sulle, Apt.	7591 N.W. 54 ST. 7591 N.W. 54 ST.			ON			3. Date Incorporated or Qualified			
Suite, Apt. #. etc.  Suite, Ap	2. Principal P	lace of Business	2a. Mailing Address					Applied	d For	
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Scriticate of Status Desired   \$8.75 Additional Fee Required	21		<u>⊢</u> ¬				59-1430530			
28   Trust Fund Contribution   Added to Fees	Suite, Apt.	#, elc.	<u> </u>					\$8.75 Additi	tional	
Personal Property Tax due June 30.    Ves   No.   Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   SALAZAR, ALBERTO   14321 S.W. 92 AVE.   MIAMI FL 33176   82   Street Address (P.O. Box Number is Not Acceptable)   82   Street Address (P.O. Box Number is Not Acceptable)   83   Street Address (P.O. Box Number is Not Acceptable)   84   City   FL   85   Zip Code   84   City   FL   85   Zip Code   85   City   FL   85   Zip Code   86   City   FL   86   Zip Code   87   City   City	City & Stat						· · · · · · · · · · · · · · · · · · ·			
SALAZAR, ALBERTO 14321 S.W. 92 AVE. MIAMI FL 33176  11. Pursuant to the provisions of Socious 607,0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of. Socious 607,0505, Florida Statutes.  SIGNATURE    TITLE   DOFT   DELETE   1.1 TITLE   DATE   Addition	_	<b>⊢</b>	h	<u> </u>	ountry					
SALAZAR, ALBERTO 14321 S.W. 92 AVE. MIAMI FL 33176  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, typed or proted name of registered lagent and titled applicable   (NOTE Registered Agent agreature required when reinstating)   DATE	24	11		30					)	
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 607.0502, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  OF FICE RS AND DIRECTORS  12. OF FICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THLE  PD  DELETE  1.1 THLE  V  DELETE  1.2 NAME  SIRRET ADDRESS  CITY-ST-ZIP  MIAMI FL  SALAZAR, ALBERTO  1.4 CITY-ST-ZIP  MIMM FL  SALAZAR, ALBERTO E.  2.2 NAME  SIRRET ADDRESS  LA321 SW 92ND AVE  MIAMI FL  DELETE  3.1 THLE  SALAZAR, ALBERTO E.  2.3 SIRRET ADDRESS  LA321 SW 92ND AVE  MIAMI FL  LA CITY-ST-ZIP  MIMM FL  LA CITY-ST-ZIP  MIAMI FL  LA CITY-ST-ZIP  MIMM FL  LA CIT					-		10. Name and Address of New Registered Age	ent		
MIAMI FL 33176    B4					В	Name				
### City #### City ### City ##	The state of the s				82	Street Add	fress (P.O. Box Number is Not Acceptable)			
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 agent, and accept the obligations of Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, highed or pretted name of registered agent end life if agrid-cable (NOTE. Registered Agent signature required when relimitating)  DATE  12. OF FICE RS AND DIRE CTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITILE  PD  DELETE  1.1 ITILE  NAME  SALAZAR, ALBERTO  1.2 SALAZAR, ALBERTO  1.3 STREET ADDRESS  CITY-ST-ZIP  MIAMI FL  U  DELETE  2.1 ITILE  V  DELETE  2.1 ITILE  V  DELETE  2.2 NAME  SREET ADDRESS  14321 SW 92ND AVE  STREET ADDRESS  CITY-ST-ZIP  MIAMI FL  Change  Addition  Addition  Change  Addition  Addition  Addition  Addition  Addition  DELETE  3.1 ITILE  Change  Addition  Addition	ML	AMI FL 33176			-					
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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or preted name of registered agent into title if applicable.  NOTE: Registered Agent signature required when reinstating)  DATE  12. OF FICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD  SALAZAR, ALBERTO  1.2 NAME  STREET ADDRESS  14321 SW 92ND AVE  STREET ADDRESS  OFFICERS AND DIRECTORS IN 12  TITLE  V  DELETE  1.1 TITLE  V  DELETE  1.2 NAME  1.3 STREET ADDRESS  CITY-ST-ZIP  MIAMI FL  Change  Addition  Addition  1.4 City-ST-ZIP  MIAMI FL  Change  Addition  Addition  TITLE  ST  DELETE  3.1 TITLE  Change  Addition  Addition					83					
SIGNATURE   Signature, typed or pricted name of registriced agent and title if equivicable   (NOTE: Registered Agent signature required when reinstating)   DATE					84	City	FL	85 Zip Code	<del>)</del>	
Signature, bysed or proceed name of registered agent and life if equit-cable   NOTE: Registered Agent signature required when reinstating)   DATE	11. Pursuant office or ragent. La	to the provisions of Sections 607.05( egistered agont, or both, in the State m familiar with, and accept the oblig	02 and 607.1508, Florida Sta of Florida. Such change wa ations of, Section 607.0505	atutes, the as authoriz , Florida Si	above ed by	e-named cor the corpora s.	poration submits this statement for the purpose of chalion's board of directors. I hereby accept the appoin	anging its reg tment as regis	istered stered	
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PD	SIGNATURE									
DELETE			· · · · · · · · · · · · · · · · · · ·	<del>-</del>		nt signature requ				
NAME   SALAZAR, ALBERTO   1.2 NAME   1.3 STREET ADDRESS   14321 SW 92ND AVE   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   MIAMI FL   1.4 CITY-ST-ZIP     Change   Addition   Additi	· · · · · · · · · · · · · · · · · · ·									
14321 SW 92ND AVE   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   MIAMI FL   1.4 CITY-ST-ZIP			Otter				L.	ichange 🗀	Addition	
CITY-ST-ZIP   MIAMI FL		•								
TITLE   V										
NAME SALAZAR, ALBERTO E. 22 NAME STREET ADDRESS 14321 SW 92ND AVE 2.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 2.4 CITY-ST-ZIP  TITLE ST DELETE 3.1 TITLE Change Addition		V	DELETE			1-ZIP		Change	Addition	
STREET ADDRESS         14321 SW 92ND AVE         2.3 STREET ADDRESS           CITY-ST-ZIP         MIAMI FL         2.4 CITY-ST-ZIP           TITLE         ST         DELETE         3.1 TITLE         Change         Addition		SALAZAR ALRERTO E	0				l,	Lought [	POUILION	
CITY-S1-ZIP         MIAMI FL         2.4 CITY-S1-ZIP           TITLE         ST         DELETE         3.1 TITLE         Change         Addition		• • • • •		1		ADDDCCC				
TITLE ST DELETE 3.1 TITLE Change Addition										
			DELETE		<del></del>	01- ZPP		Channe	Addition	
NAME   SALAZAR, ANA M.   13.2 NAME		SALAZAR, ANA M.					L	Cuango 🗀	FROUITOIT	
STREET ADDRESS 14321 S W 92ND AVE 33 STREET ADDRESS						ADDRECE				

14. I 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.

34. CITY - ST-ZIP

4.3 STREET ADDRESS

5 3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

51 TITLE

5.2 NAME

61 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

MIAMI FL

Occean deleen

DELETE

DELETE

DELETE

3-5-98

2E034 (10/97)

☐ Change

Change

Change

Addition

Addition

☐ Addition

**FILED** 

Mar 11 1998 8:00am

Secretary of State