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Mar 27 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # 382647
1. Corporation Name: AGUERO + Co. Export, Inc.

Principal Place of Business: 1125 Conal Way
Mailing Address: 6800 SW 40th St

City, State: Coral Gables FL 33134
City, State: Miami FL 33155

Zip: 33134
Zip: 33155

Country: US
Country: US

City, State: Coral Gables FL 33134
City, State: Miami FL 33155

Zip: 33134
Zip: 33155

Country: US
Country: US

9. Name and Address of Current Registered Agent
Zola Aguero
1125 Conal Way
Coral Gables FL 33134

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607 (50)2 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 the person named in Block 9 as the current registered agent (Not a Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

1.1 TITLE: President
1.2 NAME: Zola Aguero
1.3 STREET ADDRESS: 1125 Conal Way - C.G. 33134
1.4 CITY - ST - ZIP: Coral Gables FL 33134

2.1 TITLE: Vice President
2.2 NAME: Francisco Aguero
2.3 STREET ADDRESS: 1125 Conal Way - C.G. 33134
2.4 CITY - ST - ZIP: Coral Gables FL 33134

3.1 TITLE: Vice President
3.2 NAME: Maria Aguero
3.3 STREET ADDRESS: 1125 Conal Way - C.G. 33134
3.4 CITY - ST - ZIP: Coral Gables FL 33134

4.1 TITLE: Treasurer
4.2 NAME: Ezequiel Aguero
4.3 STREET ADDRESS: 1125 Conal Way - C.G. 33134
4.4 CITY - ST - ZIP: Coral Gables FL 33134

5.1 TITLE: Secretary
5.2 NAME: Beatriz Aguero
5.3 STREET ADDRESS: 1125 Conal Way - C.G. 33134
5.4 CITY - ST - ZIP: Coral Gables FL 33134

6.1 TITLE:
6.2 NAME:
6.3 STREET ADDRESS:
6.4 CITY - ST - ZIP:

7.1 TITLE:
7.2 NAME:
7.3 STREET ADDRESS:
7.4 CITY - ST - ZIP:

8.1 TITLE:
8.2 NAME:
8.3 STREET ADDRESS:
8.4 CITY - ST - ZIP:

9.1 TITLE:
9.2 NAME:
9.3 STREET ADDRESS:
9.4 CITY - ST - ZIP:

10.1 TITLE:
10.2 NAME:
10.3 STREET ADDRESS:
10.4 CITY - ST - ZIP:

11.1 TITLE:
11.2 NAME:
11.3 STREET ADDRESS:
11.4 CITY - ST - ZIP:

12.1 TITLE:
12.2 NAME:
12.3 STREET ADDRESS:
12.4 CITY - ST - ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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 13 if changed, or on an attachment with an address.

SIGNATURE: Zola Aguero - Zola Aguero - 3-23-98 446-4266

3. Date Incorporated or Qualified: 3-21-1971
3a. Date of Last Report: None change 8-31-94

4. FEI Number: 59-1348653

5. Certificate of Status Desired: ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: ☐ Yes ☐ No

81 Name:
82 Street Address (P.O. Box Number is Not Acceptable):
83 City:
84 State: FL 85 Zip Code:

86 City:
87 State:
88 Zip Code:

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90 State:
91 Zip Code:

92 City:
93 State:
94 Zip Code:

95 City:
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97 Zip Code:

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99 State:
00 Zip Code:

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03 Zip Code:

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