Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90079 048 \*\*\*150.00



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## <u>1999</u> DOCUMENT # วล

1. Corporation Name

	IMPE.	x international brokei	RAGE, INC.				
Principal Place of Business Mailing Address							f 100/02 tildt 1870t bliftt gibin tinpt ynit gielt gigtt gegit gegit gegit gegit gegit gegit jant
844	60 NW 30 TR		9600 NW 12 ST				
MIAMI FL 33122 MIAMI FL 33192							DO NOT WRITE IN THIS SPACE
US							
							3. Date Incorporated or Qualifed 07/15/1971
2.	Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21		26					<b>59-1356635</b> Not Applicable
	Suite, Apt.	ite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired See Required
22		27					5. Certificate of Status Desired
	City & State	& State City & State			6. Election Campaign Financing \$5.00 May Be		
23		28					Trust Fund Contribution Added to Fees
	Zip	Country	Zip	Count	try		8. This corporation owes the current year intangible
24		25	29 3	30			Personal Property Tax.
		9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Registered Agent
				8	B1	Name	•
DELCERRO, JR., ALBERTO					32	Street	Address (P.O. Box Number is Not Acceptable)
9891 SW 28 STREET							
MIAMI FL 33165				8	<b>B3</b>		
				}		City	85 Zip Code
				'	B4	City	F.L.
	office or re	to the provisions of Sections 607.050; egistered agent, or both, in the State in familiar with, and accept the obligat	of Florida. Such change was aut	nonzed t	by t	ne corpo	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered					gent	signature r	required when reinstating) DATE
12.		OFFICERS AN	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TIT	LE			1.1 TITU	1.1 TITLÉ		Change Addition
NA	ME DEL CERRO JR,ALBERTO			1.2 NAME			
ST	STREET ADDRESS 9891 S.W. 28TH STREET			1.3 STREET		ADDRESS	
CIT	TY-ST-ZIP	ST-ZIP MIAMI FL		1.4 CITY-ST-ZIP		-ZIP	
TIT	LE	TD	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NA	ME	DEL CERRO, MARGARITA		2.2 NAM	2.2 NAME		
ST	STREET ADDRESS 10015 SW 2 TERR.			2.3 STREET ADDRE		ADDRESS	
CITY-ST-ZIP MIAMI, FL 00000			2		2. 4 CITY-ST-ZIP		
TIT	LE			3.1 TITL	3.1 TITLE		Change Addition
NAME		DEL CERRO, JUAN A.		3.2 NAM	3.2 NAME		
STREET ADDRESS				33 STR	3 3 STREET ADDRESS		
	ry-st-zip			3.4. CIT	3.4. CITY- ST- ZIP		
_	LE L				4.1 TITLE		Change Addition
	ME			4. 2 NAN	ИE		
	REET ADDRESS			4.3 STR	EET.	ADDRESS	;
	Y-ST-ZIP			4.4 CITY			
_	17-51-2IP		DELETE	5.1 TITL			☐ Change ☐ Addition

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, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OF DISPLOYOR

☐ DELETE

(305) 593-1055

Change

Addition

32E034 (11/98)