PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT # 473166



Secretary of State DIVISION OF CORPORATIONS

FILED Feb 23, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE Katherine Harris 02-23-1999 90114 040 ***158.75

1. Corporation	Name 410100				
BABE	XPORT, INC.				
	0111, 1110			I LEDIKA DICH KORDA KAISI MAND EMAR SAKA DICH	ALBUT BIÐIL ÐIÐIL ÐIÐIL ÐIÐIL IÐIL
Principal Place of Business Mailing Address				- I INDITAL DIRIN INDEN INDEN NUMBER OUTIN REIN GEBUT	BININ BYNN RINGS NINK ALOU CONC
1941 NE 123RD ST 1941 NE 123RD ST					
N MAIMI FL 33181 N MAIMI FL 33181					
				DO NOT WRITE IN THE	S SPACE
				3. Date Incorporated or Qualifed	•
				04/17/1975	A-ti-d For
_	lace of Business	2a. Mailing Address		4. FEI Number	Applied For Not Applicable
26 Suite, Apt. #, etc. Suite, Apt. #, etc.			59-1625854	\$8.75 Additional	
			5. Certifcate of Status Desired	Fee Required	
City & State		City & State		A Flactice Compaign Financing	\$5.00 May Be
·	,			6. Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year in	
	25	29	30	Personal Property Tax.	☐Yes ☐No
24	g. Name and Address of Currer		1301	10. Name and Address of New Registered	Agent
-	5		81 Name	Eduardo BAlbon	A
PIEDRA, JUANA				ress (P.O. Box Number is Not Acceptable)	<i>y</i>
1941 NE 123 ST			82 Street Add	641 NE 123 St.	
N MI	AMI, FL		83	7	
N MI	AMI FL 33181				
			84 City //	MiAmi F	85 Zip Code
44 Dureuant	to the provisions of Sections 607 050	02 and 607.1508. Florida Statu	tee the above-named corr	poration submits this statement for the purpose	of changing its registered
office or r	egistered agent, or both, in the State	of Florida. Such change was	whorized by the corporati	on's board of directors. I hereby accept the app	ointment as registered
agent, I a		ations of, Section 607.0905. Fr	Mida Statutes.	Dog do	19P
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable	Registered Agent signature require	ed when reinstating) DATE	<u> </u>
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	V	☐ DELETE	1.1 TITLE	\mathcal{P}	Change Addition
NAME	Balbona, Eduardo		1.2 NAME	BAlbon & Eduando	
STREET ADDRESS	1941 NE 123 ST		1.3 STREET ADDRESS	1941 NE 12355	ļ
CITY-ST-ZIP	N MIAMI FL		14 CITY-ST-ZIP	N. NIAMI PI	
TITLE	P	☐ DELETE	2.1 TITLE	Piedry July 14 1941 NE 1285t	☐ Change ☐ Addition
NAME	PIEDRA, JUANA		2.2 NAME	Piedrasia	{
STREET ADDRESS	1941 NE 123 ST		2.3 STREET ADDRESS	1941 NE 12000	
CITY-ST-ZIP	N MIAMI FL		2.4 CITY-ST-ZIP	N. Migmi F	,,, <u>, , , , , , , , , , , , , , , , , ,</u>
TITLE		DELETE	3.1 TITLE -		Change Addition
NAME			32 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME	•	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY- ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
1	İ				1
STREET ADDRESS			6.3 STREET ADDRESS		Í

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 peport at 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 impowered.

SIGNATURE: