05-05-1999 90045 047 \*\*\*150.00

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

PROFIT: CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 529171

1. Corporation Name

IMEX TRADING INTERNATIONAL, INC.

Principal Place	e of Business	Mailing Address	Mailing Address					٠.	
5775 S.W. 80TH	I STREET	5775 S.W. 80TH STREET							
S. MIAMI FL 33	143	S. MIAMI FL 33143			DO NOT WRITE IN THIS SPACE				
<b>-</b> .,						3. Date Incorporated or Qualifect			<u> </u>
						03/24/1977		•	
2 Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
— `	lace of Business	— <u> </u>	26			59-1776197		No	t Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					\$8.75	Additional
22		27	27			5. Certificate of Status Desired		Fee Re	equired
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
23		28	28			Trust Fund Contribution		Added 1	
Zip	Country	Zip				8. This corporation owes the cur	rent year Int	angjble	
24	25	29	30			Personal Property Tax.		Yes	□No
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New	Registered	Agerit	
			]	81	Name				
	GAL, LINDA		82 S			ess (P.O. Box Number is Not Accep	table)		
	S.W. 80TH STREET		02 011				,		
S. M	HAMI FL 33143		83						
			-	84	City			85 Zip (	Code
			1		•		FL	. 1 !	
11. Pursuant	to the provisions of Sections 607.05	502 and 607,1508, Florida Statutes	s, the ab	ove-	<ul> <li>named corporation</li> </ul>	oration submits this statement for the on's board of directors. I hereby access	e purpose of	changing its	registered gistered— -
agent. I a	m familiar with, and accept the oblig	pations of, Section 607.0505, Florid	da Statu	tes.					•
SIGNATURE	*								<u>.                                    </u>
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regis				\gent	signature required	d when reinstating) ADDITIONS/CHANGES TO O	DATE FEICERS AN	ID DIRECTO	DRS IN 12
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO O	TICERS AI	Change	Addition
TITLE	PD	O pere le	1.1 TITLE					onango	
NAME .	BERGAL, LINDA		1.2 NAME 1.3 STREET ADDRESS						
STREET ADDRESS	5775 S.W. 80TH STREET								
CITY-ST-ZIP	<u> </u>		_	1.4 CITY-ST-ZIP				Change	Addition
TITLE		☐ pere⊥e							
NAME			l l	2.2 NAME					ļ
STREET ADORESS	ŕ		2.3 STREET ADDRESS						1
CITY-ST-ZIP		□ DELETE	2. 4 CIT		r-ZIP			Change	Addition
TITLE									
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-ST-ZIP			_	3.4. CITY-ST-ZIP				Change	Addition
TITLE		☐ DELETE	4.1 TITLE					ogo	
NAME			4. 2 NA						
STREET ADDRESS	-		4.3 STREE		į				
CITY-\$T-ZIP	·	D DELETE	4.4 CITY-5		-ZIP			Change	☐ Addition
TITLE		DELETE	5.1 TITLE 5.2 NAME					□ Auguda	
NAME		•			ADDRESS				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		☐ DELETE	54 CIT		-44			☐ Change	Addition
TITLE		[1] nereie	6.2 NAI						C) Addition
NAME					AODDECO				
STREET ADDRESS	1		0331	KEC!	ADDRESS				

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

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.

CR2E034 (11/98)