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Mar 17, 1999 8:00 am
Secretary of State

03-17-1999 90153 014 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **543254**
 1. Corporation Name
ALEXANDER IMPORTS, INC.



Principal Place of Business: 4431 NE 24TH AVE, LIGHTHOUSE POINT FL 33064, US
 Mailing Address: C/O JAMES O BIRR, 600 NE 3RD AVE, FT LAUDERDALE FL 33304, US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 4431 N.E. 24th Avenue, Suite, Apt #, etc. Lighthouse Point, Florida
 2a. Mailing Address: 26 1650 N.E. 26th Street, Suite, Apt #, etc. Suite 101, Fort Lauderdale, FL
 23 33064, 25 Country
 29 33305, 30 USA

3. Date incorporated or Qualified: 08/18/1977
 4. FEI Number: 59-1778106
 5. Certificate of Status Desired: \$8.75 Additional Fee Required
 6. Election Campaign Financing: \$5.00 May Be Added to Fees
 8. This corporation owes the current year Intangible Personal Property Tax: Yes No

9. Name and Address of Current Registered Agent
 BIRR, JAMES O. JR.,
 600 NORTHEAST 3RD AVENUE
 FT. LAUDERDALE FL 33304

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable): 1650 N.E. 26th Street
 83 Suite 101
 84 City: Fort Lauderdale, FL 85 Zip Code: 33305

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	BERG, DENNIS	
STREET ADDRESS	4431 NE 24TH AVE	
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	BARRETT, G.	
STREET ADDRESS	200 E. 27TH ST.	
CITY-ST-ZIP	NEW YORK NY	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	4431 N.E. 24th Avenue
14 CITY-ST-ZIP	Lighthouse Point, Florida 33064
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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

SIGNATURE: *[Signature]* Date: 3-8-99 Daytime Phone #: (954) 946-6746

CR2E034 (11/98)