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

PROFIT CORPORATION ANNUAL REPORT

1999

IMPORT BROKERS, INC.

CITY-ST-ZIP

SIGNATURE:

DOCUMENT # 610967

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 28, 1999 8:00 am Secretary of State

04-28-1999 90016 034 ***150.00



Principal Place of Business Mailing Address							01011 ¥1211 01011 01	811 81811 1881
2569 NW 74TH AVENUE MIAMI FL 33122		2569 N.W. 74TH AVE Miami FL 33122 US			DO NOT WRITE IN THI	G SPACE		
						3. Date Incorporated or Qualifed		_
						02/23/1979		
2. Principal Place of Business 2a. Ma		2a. Mailing Address	Mailing Address		4. FEI Number	<u> </u>	plied For	
21		26				59-1883484		t /\pplicable
Suite, Ap:. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A Fee Red		
City & Strate		City & State	City & State			5 Starting Companies Financies	\$5.00	·
City & State		28			6. Election Campaign Financing Trust Fund Contribution	Added to	, ,	
Zip Country			Zip Country			8. This corporation owes the current year Ir tangible		
24	25	29	30			Personal Property Tax.		□]No
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered	Agent	
	OT ADDIANNE		81	Nar	ne			
HURST, ADRIANNE			82	Stre	et Adcre	ess (P.O. Box Number is Not Acceptable)		
2569 NW 74TH AVENUE MIAMI FL 33122			-					
MIM	11 FL 33122		83					
			84	City	,	F	85 Zip C	ode
		20 4 607 1509 Elecido Statutiv	c the above		od corx	oration submits this statement for the purpose of		registered
office or a	egistered agent, or hoth, in the State.	of Florida. Such change was aut	thorized by	the c	orporat of	n's board of directors. I hereby accept the appoint	intment as reg	jis tered
agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Florid	da Statutes.	•				
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE I	Registered Agen	it signal	De liupet eru	1 when reinstating) DATE		
12.	0 771	ND DIRECTORS	13.			ADDITIO VS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1 1 TITLE				☐ Change	Addition
NAME	HURST, ADRIANNE		1.2 NAME		1			
STREET ADDRES 3	2569 NW 74TH AVENUE		1.3 STREET	ADDR	ESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST	T-ZIP				
TITLE	STD	☐ DELETE 2.1		1 TITLE			Change	Addition
NAME	SPAULDING, DENISE		2.2 NAME					
STREET ADDRESS	2569 NW 74TH AVENUE		2.3 STREET	ADDRI	ESS			
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-S	T-ZIP	-			
TITLE		☐ DELETE	3.1 TITLE		ļ		Change	☐ Addition
NAME			3 2 NAME		-			
STREET ADDRES 3			3.3 STREET		ESS			
CITY-ST-ZIP			3.4. CITY-S	T-ZIP	 -		☐ Change	Addition
TITLE			4.1 TITLE				change	
NAME			4 2 NAME	- ADDD	-66			
STREET ADORES 3			4.3 STREET		:55			
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST	I-ZIP	 -		Change	Addition
NAME			5.2 NAME				_ ,	
STREET ADDRES			5.3 STREET	r addri	ESS			
			54 CITY-S					,
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME			6 2 NAME					
STREET ADDRES			6.3 STREET	r addri	ESS			

6.4 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 a nual 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 or all attachment with an address, with all other like empowered.