


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

FILED  
Apr 29 1997 8:00am  
Secretary of State

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|---|--|--|--|--|--|
| <b>PROFIT CORPORATION ANNUAL REPORT 1997</b>  |  |         |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS  |  |
| <b>DOCUMENT # F15420</b><br>1. Corporation Name<br><b>BARUTENO EXPORT &amp; IMPORT, INC.</b>  |  |  |  |  |  |
| Principal Place of Business<br><b>3271 NW 7 Street<br/>Miami, FL 33125</b>  |  |  | Mailing Address<br><b>3271 NW 7 Street<br/>Miami, FL 33125</b> |  |  |
| 2. Principal Place of Business<br>21 State, Apt. #, etc.<br>22 City & State<br>23 Zip<br>24 Country   |  | 2a. Mailing Address<br>26 Suite, Apt. #, etc.<br>27 City & State<br>28 Zip<br>29 Country |  | 3. Date Incorporated or Qualified<br><b>01/20/1981</b><br>3a. Date of Last Report<br><b>APRIL 1996</b><br>4. FEI Number<br><b>59-2071584</b><br>5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b><br>6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b><br>8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |
| 9. Name and Address of Current Registered Agent<br><b>WALLACE, MILTON, ESQ.<br/>100 S.E. 2nd. Street<br/>21st. Floor<br/>Miami, FL 33131</b>  |  |  |  | 10. Name and Address of New Registered Agent<br>81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable)<br>83<br>84 City<br>85 Zip Code <b>FL</b>   |  |
| 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 re-registering) _____ DATE _____  |  |  |  |  |  |
| <b>12. OFFICERS AND DIRECTORS</b>   |  |  |  |  |  |
| 11 TITLE <input type="checkbox"/> DELETE<br>12 NAME <b>HERNANDEZ, SANTIAGO DIAZ</b><br>13 STREET ADDRESS <b>3271 NW 7 Street</b><br>14 CITY-ST-ZIP <b>Miami, FL 33125</b>   |  |  |  |  |  |
| 21 TITLE <input type="checkbox"/> DELETE<br>22 NAME <b>DIAZ, MARISOL</b><br>23 STREET ADDRESS <b>3271 NW 7 Street</b><br>24 CITY-ST-ZIP <b>Miami, FL 33125</b>  |  |  |  |  |  |
| 31 TITLE <input type="checkbox"/> DELETE<br>32 NAME<br>33 STREET ADDRESS<br>34 CITY-ST-ZIP  |  |  |  |  |  |
| 41 TITLE <input type="checkbox"/> DELETE<br>42 NAME<br>43 STREET ADDRESS<br>44 CITY-ST-ZIP  |  |  |  |  |  |
| 51 TITLE <input type="checkbox"/> DELETE<br>52 NAME<br>53 STREET ADDRESS<br>54 CITY-ST-ZIP  |  |  |  |  |  |
| 61 TITLE <input type="checkbox"/> DELETE<br>62 NAME<br>63 STREET ADDRESS<br>64 CITY-ST-ZIP  |  |  |  |  |  |

14. I do 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

SIGNATURE: \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

100002163001  
-05/02/97--01044--027  
\*\*\*165.00

CR2E034 (9/96)