FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION ANNUAL REPORT 1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
91 APR 17 AM 10: 05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE OF $61.25 REQUIRED

1 Name and Mailing Address of Corporation DOCUMENT #F22333 (1)

ZIP + 4 PRESORT

HESCO EXPORT CORPORATION
4295 E 11TH AVENUE
C/O EVELIO ACOSTA
HIALEAH, FLORIDA 33013-2530

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by amendment.

21 Street Address
22 PO Box
23 City and State
24 Zip Code

3 Date Incorporated or Qualified To Do Business in Florida: 03/09/1981

4 FEI Number: 59-2095804

FEI Number Applied For
FEI Number Not Applicable

5 $8.75 Additional Fee required for a Certificate of Status. CERTIFICATE OF STATUS DESIRED [ ]

6 Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1	D/P	ACOSTA, EVELIO	~~4295 E 11TH AVE~~	~~HIALEAH, FLORIDA~~ 00000
1x			7905 N.W. 164 TER.	Miami - Fl. 33016
2				
2x				
3				
3x				
4				
4x				
5				
5x				
6				
6x				

300002414043

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

ACOSTA, EVELIO
~~4295 E 11TH AVENUE~~ 7905 NW. 164 TER.
~~HIALEAH, FLORIDA 33013~~ Miami - Fl. 33016

8 Name and Address of New Registered Agent

81 Name
82 Street Address 1 (Do NOT Use P.O. Box Numbers)
83 Street Address 2 (Do NOT Use P.O. Box Numbers)
84 City
85 Zip Code
FL.

9 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 ______ (Registered Agent Accepting Appointment) DATE ______

10 I 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. I further certify 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 6 or on an attachment with an address.

SIGNATURE X [signature] DATE 4/9/91

Typed Name of Signing Officer or Director: Evelio Acosta
Title: D/P
Telephone Number Daytime: (305) 665-7708

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State

$8.75 Additional Fee required for a Certificate of Status