

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**PROFIT CORPORATION ANNUAL REPORT 1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT #**  
1. Corporation Name

*F38144*

**CLAVI- EXPORT AND IMPORT CORP.**

Principal Place of Business Mailing Address

**1331 STELL WATER D  
MIAMI BEACH, FL 33141**

3. Date Incorporated or Qualified 3a. Date of Last Report  
**1995**

2. Principal Place of Business

2a. Mailing Address

21 **MIAMI BEACH**  
Suite, Apt. #, etc.

26 **SAME**  
Suite, Apt. #, etc.

4. FEI Number Applied For Not Applicable  
**64-0156615**

22 City & State

27 City & State

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23 **FLORIDA**

28 City & State

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24 **33141** 25 **DADE**

29 Zip 30 Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CLARA NOA  
1331 STELL WATER DR.  
MIAMI BEACH, FLA 33141**

81 Name **LUIS DEL VILLAR**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**1331 STELL WATER DR.**  
83  
84 City **MIAMI BEACH** 85 Zip Code **FL 33141**

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 *Clara Noa*

*Luis Del Villar*

DATE **4-29-96**

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<b>PRESIDENT-TREASURY</b> <input type="checkbox"/> DELETE
NAME	<b>LUIS DEL VILLAR</b>
STREET ADDRESS	<b>1331 STELL WATER DR.</b>
CITY-ST-ZIP	<b>MIAMI BEACH FL 33141</b>
TITLE	<b>VICE-PRESIDENT-SECRETARY</b> <input type="checkbox"/> DELETE
NAME	<b>CLARA NOA</b>
STREET ADDRESS	<b>1331 STELL WATER DR</b>
CITY-ST-ZIP	<b>MIAMI BEACH, FL 33141</b>
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	

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. 1. TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3. 1. TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4. 1. TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5. 1. TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. 1. TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**600001894428**  
**-07/16/96--01066--033**  
**\*\*\*225.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Luis Del Villar*

DATE **4-29-96** (205)866-4195

CR2E034 (12/95)