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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F53394

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## FILED Feb 02 1998 8:00am Secretary of State

CALVEDA EXPORT CORPORATION				·	
0.012		•		P ARRIANA SIAN MICHAE APINA DINA MADI MINI MINI MINI M	301 0101 0101 0101 0101 0101 1001
Principal Plac	e of Business	Mailing Address		1881188	I BUT OLDSA DIDAL OLDSA OLDSA IDDA
11741 N.W. 30TH PLACE 11741 N.W. 30TH P.		11741 N.W. 30TH PLACE			
SUNRISE FL 33323 SUNRISE FL 33323					
				DO NOT WRITE IN TH	IS SPACE
				3. Date incorporated or Qualified	
2. Principal P	Place of Business	2a. Mailing Address		11/12/1981 4. FEI Number	Applied For
21		26		59-2140656	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		26		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
	g, Name and Address of Curre	nt Hegistered Agent	81 Name	10. Name and Address of New Registers	od Agent
	UCKER HOWARD		oi Name		
11741 N.W. 30TH PLACE,			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
80	Inrise fl 33323		63		
			63		
			84 City		85 Zip Code
44 Pureuent	to the provisions of Sections 607 050	02 and 607 1508. Florida Statut	es the above named corn	possition submitte this statement for the number	
office or r	egistered agent, or both, in the State	of Florida. Such change was a	authorized by the corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the a	ppointment as registered
_	m familiar with, and accept the oblig	jations of, Section 607.0505, Fig	orida Statutes.		
SIGNATURE	Signature, typed or printed name of registered ag	jorst and title if applicable (NOT)	L: Hagistered Agent signature require	or when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 1(TL€		Change Addition
NAME	DRUCKER, HOWARD		1.2 NAME		
STREET ADDRESS	11741 N.W. 30TH PLACE		1.3 STREET ADDRESS		
CITY-ST-ZIP	SUNRISE FL		1.4 CITY-ST-ZIP		
TITLE	STV	☐ DELETE	2.1 TITLE		Change  Addition
NAME	DRUCKER, JUDY		2.2 NAME		
STREET ADDRESS	11741 N.W. 30TH PLACE		2.3 STREET ADDRESS		
CITY-ST-ZIP	SUNRISE FL	The section	2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	<u> </u>	DELETE	3.4. CITY-ST-ZIP 4.1 TiTLE		Change Addition
NAME		perere			Change C Apoliton
STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP					
TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		C Gridingo C /reduksir
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			5.4 Cft Y-ST-ZIP		
TITLE		DELETE	5.4 CHT-SI-ZEP		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-7IP			6 A CITY - ST - ZIP		

14. 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.

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