


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

FILED
May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F79870 (4)
1. Corporation Name
LATIN AMERICAN BASIN IMPORT EXPORT, INC.

Principal Place of Business 7775 NW 66TH STREET MIAMI FL 33166-2811 US	Mailing Address 7775 NW 66TH ST MIAMI FL 33166 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 05/13/1982	
4. FEI Number 59-2194209		5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		\$8.75 Additional Fee Required \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent GUTHRIE, REX B. 200 S BISCAYNE BLVD STE 4950 MIAMI FL 33131				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VPD	<input type="checkbox"/> DELETE		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ESTEVEZ, MARIA			1.2 NAME			
STREET ADDRESS	1335 SW 86TH COURT			1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			1.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LLANES, GAYLE			2.2 NAME	LLANES, GAYLE		
STREET ADDRESS	19525 W. LAKE DRIVE			2.3 STREET ADDRESS			
CITY-ST-ZIP	HALEAH FL			2.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LLANES, MAURICIO			3.2 NAME			
STREET ADDRESS	380 WHITEHORN DR			3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI SPGS FL			3.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LLANES, ALFONSO			4.2 NAME			
STREET ADDRESS	8870 FOUNTAINBLEAU BLVD #207			4.3 STREET ADDRESS	10341-1 N.W. 9th street, circle 1		
CITY-ST-ZIP	MIAMI FL			4.4 CITY-ST-ZIP	MIAMI, FL 33172		
TITLE	STD	<input type="checkbox"/> DELETE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BONILLA, DIANA LLANES			5.2 NAME			
STREET ADDRESS	19900 NW 83RD AVE			5.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME				6.2 NAME	PRESIDENT ALEJANDRO A. LLANES		
STREET ADDRESS				6.3 STREET ADDRESS	20141 NW 81 COURT		
CITY-ST-ZIP				6.4 CITY-ST-ZIP	MIAMI, FL 33015		

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 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:  Alejandro Llanes, Pres. 4/22/98 805-639-2629

CR2E034 (10/97)