-	NOW: FILING FEE	AFTER MAY	1ST IS	\$\$550.00	_ FII	LED	
COF	PROFIT RPORATION JAL REPORT	FLOF	IDA DEPART Sandra B. Secretary		Jan 22 19		
1998		DIV	DIVISION OF CORPORATIONS		Secretary of State		
1. Corporation		0002547	7 (6)	······································			
EXPOR	T AND BUSINESS SERVI	CES INC.				III <b>Ko</b> tti <b>o</b> nik iyak dilik di	
Principal Place	e of Business	Mailing Addre	ess				
13621 SW 109 ST MIAMI FL 33186 US		13621 SW 10	13621 SW 109 ST MIAMI FL 33186		DO NOT WRITE	E IN THIS SPACE	
					3. Date Incorporated or Qualified 05/25/1995		
'	lace of Business	2a. Mailing Ac	Idress		4. FEI Number		oplied For
21 Suite, Apt.	#, etc.	26 Suite, Apt.	#, etc.		65-0566545	¢9.75	ot Applicable Additional
22		27			5. Certificate of Status Desired	Fee R	equired
City & State	a	City & Stat			<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>		May Be to Fees
Zip 24	Country 25	Zip 29		Country 30	<ol> <li>This corporation owes or has pa Personal Property Tax due June</li> </ol>		tangible No
	9. Name and Address of Cur				10. Name and Address of New Re		
	NANDEZ, MARIA L			81 Name			
	21 S.W. 109 ST. MI FL 33186			82 Street Add	ress (P.O. Box Number is Not Acceptal	ole)	
				83	<u></u>		
				84 City		FI 85 Zip	Code
11. Pursuant I	to the provisions of Sections 607.0	0502 and 607,1508, Fig	orida Statutes		poration submits this statement for the p	FL [ ]	
	A June 13 weeks			s, the above-named corr thorized by the corpora ida Statutes.	poration submits this statement for the p tion's board of directors. I hereby acce	Durbose of changing i pt the appointment as	ts registered registered
SIGNATURE	Signature, typed or phinted name of registered	agent and title if applicable.	RROS,	s, the above-named corr thorized by the corporation of the statutes, EXEC- VP. Registered Agent signature requi	ired when reinstating)	FL purpose of changing I pt the appointment as JAN-14, / DATE	ts registered registered
SIGNATURE	Signature, typed or plinted name of registered	agent and title if applicable.	RROS,	s, the above-named corr thorized by the corpora ida Statutes. EXEC - V P. Registered Agent signature requ 13.		FL purpose of changing I pt the appointment as JAN-14, / DATE	ts registered registered
SIGNATURE	Signature, typed or phinted name of registered	agent and title if applicable.	RROS , (NOTE:	s, the above-named corr thorized by the corporation of the statutes, EXEC- VP. Registered Agent signature requi	ired when reinstating)	FL purpose of changing i pt the appointment as <b>JAW-14,</b> DATE DERS AND DIRECTOR	ts registered registered
SIGNATURE 12. TITLE NAME STREET ADDRESS	Taking Signature, typed or phinted harne of registered OFFICERS / PC FERNANDEZ, MARIA L 13621 S.W. 109 ST.	agent and title if applicable.	RROS , (NOTE:	s, the above-named corr thorized by the corpora ida Statutes. EXEC. U.P. Registered Agent signature requination 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ired when reinstating)	FL purpose of changing i pt the appointment as <b>JAW-14,</b> DATE DERS AND DIRECTOR	ts registered registered
SIGNATURE	Signature, typed or phinted harne of registered OFFICERS / PC FERNANDEZ, MARIA L 13621 S.W. 109 ST. MIAMI FL 33186	agen and title if applicable.	RROS , (NOTE:	s, the above-named corr tihorized by the corpora ida Statutes. EXEC. V.P. Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME	ired when reinstating)	FL purpose of changing i pt the appointment as <b>JAW-14,</b> DATE DERS AND DIRECTOR	ts registered registered <b>998</b> IS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or physics frame of registered OFFICERS / PC FERNANDEZ, MARIA L 13621 S.W. 109 ST. MIAMI FL 33186 SD BARROS, PEDRO A	agen and title if applicable.	ROS (NOTE: DELETE	s, the above-named corr tihorized by the corpora ida Statutes. EXEC. U.P. Registered Agent signature requ 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	red when reinstating) ADDITIONS/CHANGES TO OFFIC	FL Durpose of changing i pt the appointment as JAU-14, / DATE CERS AND DIRECTOP Change	IS registered registered <b>998</b> IS IN 12 Addition
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