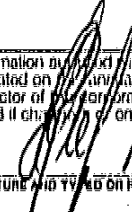


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortherm Secretary of State DIVISION OF CORPORATIONS		APPROVED AND FILED 95 APR 27 PM 1:31 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # G24763 (6)					
1. Corporation Name FRIENDSHIP IMPEX INC.					
Principal Place of Business 1161 NW 100 WAY PLANTATION FL 33322		Mailing Address 1161 NW 100 WAY PLANTATION FL 33322		DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/16/1983	
21		26		3a. Date of Last Report 05/23/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 59-2335087	
22		27		Applied For Not Applicable	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Country		Zip		Country	
24		25		29	
Country		Zip		Country	
25		29		30	
9. Name and Address of Current Registered Agent TJIN-A-TSOI, HARRY 1161 NW 100 WAY PLANTATION FL 33322				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL	
				85 Zip Code	
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 reappointing) _____ DATE _____					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE PSD		1.1 TITLE		☐ Change ☐ Addition	
NAME TJIN-A-TSOI, HARRY		1.2 NAME			
STREET ADDRESS 1161 NW 100 WAY		1.3 STREET ADDRESS			
CITY - ST - ZIP PLANTATION FL		1.4 CITY - ST - ZIP			
TITLE		2.1 TITLE		☐ Change ☐ Addition	
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS			
CITY - ST - ZIP		2.4 CITY - ST - ZIP			
TITLE		3.1 TITLE		☐ Change ☐ Addition	
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY - ST - ZIP		3.4 CITY - ST - ZIP			
TITLE		4.1 TITLE		☐ Change ☐ Addition	
NAME		4.2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CITY - ST - ZIP		4.4 CITY - ST - ZIP			
TITLE		5.1 TITLE		☐ Change ☐ Addition	
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
CITY - ST - ZIP		5.4 CITY - ST - ZIP			
TITLE		6.1 TITLE		☐ Change ☐ Addition	
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY - ST - ZIP		6.4 CITY - ST - ZIP			
14. I do hereby certify that the information furnished with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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:  Harry Tjin-A-Tsoi 4/24/95 (305) 475-8382					
SIGNATURE AND TITLE TO BE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					