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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # G88449 1. Corporation Name

SOUND BAY IMPORT-EXPORT, INC.

Principal Place of Business	Mailing Address	
900 S.E. 1ST AVENUE MIAMI FL 33131	900 S.E. 1ST AVENUE MIAMI FL 33131	

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90074 020 ***150.00



Principal Place of Business Mailing Address										
900 S.E. 1ST AVENUE 900 S.E. 1ST AVENUE										
MIAMI FL 33	131	MIAMI FL 33131								
						DO NO	T WRITE IN TH	IS SPACE		
						3. Date Incorporated or Qu	ualifed			٦
2. Principal	Place of Business	2a Mailine Address				02/23/1984				-
21	. 1000 01 50381633	2a. Mailing Address				4. FEI Number		A	pplied For	٦,
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.				59-2384799			ot Applicable	<u>.</u>
22		27			5. Certifcate of Status Des	ired 🗀		Additional	1 8	
City & St	ate	City & State						equired	_	
3		28			6. Election Campaign Fina	ncing		May Be	-	
Zip	Country	Zip	Co	untry		Trust Fund Contribution			to Fees	_
4	25	29	30	•		This corporation owes the Personal Property Tax.	e current year Ir	ntangible ^*III Yes		ĺ
	9. Name and Address of Current	Registered Agent		"		10. Name and Address of	New Registers		□No	
IA:	CID DODOLEO	· · · · · · · · · · · · · · · · · · ·		81 Nam	е		TOW INDIGITOR	Agent		-
S) 100	CIR, RODOLFO D S.E. IST AVENUE			92 Stroe	+ A d d u u =	- (B O B - N - 1				.]
	AMI FL 33131		82 Street A		et Addres	s (P.O. Box Number is Not A	cceptable)			
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man ze yest	*** <u>*</u>			84 City			FI	85 Zip'(
 Pursuan office or 	t to the provisions of Sections 607.0502 registered agent, or both, in the State of	and 607.1508, Florida Statu	ites, the a	bove-name	d corpora	ation submits this statement for	or the purpose o	changing its	registered	┨
agent. I	registered agent, or both, in the State of am familiar with, and accept the obligation	ons of, Section 607,0505, Fi	authorizeo orida Stati	d by the cor utes.	poration's	s board of directors. I hereby	accept the appo	intment as re	gistered	1
SIGNATURE]
12.	Signature, typed or printed name of registered agent a		E: Registered	Agent signature	required wh	heri reinstating)	DATE			
ITLE	OFFICERS AND		13.			ADDITIONS/CHANGES TO	OFFICERS A	ID DIRECTO	RS IN 12	18
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TREET ADDRESS			1.2 NA							7
ITY-ST-ZIP	MIAMI FL 33156			REET ADDRESS	6					👸
TLE	DVP			TY-ST-ZIP	.] 🛭
AME	JACIR, MARCELO	□ DELETE	2.1 T/T					☐ Change	Addition] ㅇ
TREET ADDRESS			2.2 NA	-						[·
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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 effect 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, with all other like empowered.

IGNATURE:

ANA THE CR

(305) 362-9139