

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

CORPORATION IN
ANNUAL REPORT
1995



OFFICE OF THE SECRETARY OF STATE
TALLAHASSEE, FLORIDA
32399-0001

APPROVED
AND
FILED

MAY 10 AM 10:25

DOCUMENT # H85760

(7)

JADE IMPORT EXPORT, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Address of Employer

Mailing Address

2000 NW 95TH AVE.
MIAMI FL 33122

2000 NW 95TH AVE.
MIAMI FL 33122

(Do Not Write in this Space)

3. Date of Filing of Report 11/18/1985	3a. Date of Last Report 05/13/1994
4. FIC Number 59-2605302	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Finance and Trust Fund Contributions ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for unreported tax under 5-1199.02? Florida Statutes ☒ Yes ☐ No	

2. Date of Filing of Report 21	2a. Mailing Address 26
3. Date of Filing of Report 22	3a. Mailing Address 27
4. Date of Filing of Report 23	4a. Mailing Address 28
5. Date of Filing of Report 24	5a. Mailing Address 29
6. Date of Filing of Report 25	6a. Mailing Address 30

9. Name and Address of Current Registered Agent

ZAFIR, TAMAS
15271 NORTHWEST 60TH AVENUE
MIAMI LAKES FL 33014

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (Do Not Number as Not Applicable)	
83. City	
84. State	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 500.01, 500.02, and 500.03, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered office (or registered agent) in both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept this appointment as registered agent. I am familiar with and understand the obligations of Sections 500.01, 500.02, and 500.03, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS 13. ADDITIONAL OFFICERS AND DIRECTORS

1. NAME D ZAFIR, TAMAS	1. NAME N. Miami Beach, FL 33179
2. STREET ADDRESS 1200 NE MIAMI GARDENS DR. W1015	2. STREET ADDRESS
3. CITY MIAMI FL 33179	3. CITY
4. NAME	4. NAME
5. STREET ADDRESS	5. STREET ADDRESS
6. CITY	6. CITY
7. NAME	7. NAME
8. STREET ADDRESS	8. STREET ADDRESS
9. CITY	9. CITY
10. NAME	10. NAME
11. STREET ADDRESS	11. STREET ADDRESS
12. CITY	12. CITY
13. NAME	13. NAME
14. STREET ADDRESS	14. STREET ADDRESS
15. CITY	15. CITY
16. NAME	16. NAME
17. STREET ADDRESS	17. STREET ADDRESS
18. CITY	18. CITY
19. NAME	19. NAME
20. STREET ADDRESS	20. STREET ADDRESS
21. CITY	21. CITY
22. NAME	22. NAME
23. STREET ADDRESS	23. STREET ADDRESS
24. CITY	24. CITY
25. NAME	25. NAME
26. STREET ADDRESS	26. STREET ADDRESS
27. CITY	27. CITY
28. NAME	28. NAME
29. STREET ADDRESS	29. STREET ADDRESS
30. CITY	30. CITY

14. I hereby certify that the information reported with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 500.01, 500.02, and 500.03, Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect and meaning under with that I am an officer or director of this corporation or the receiver or trustee responsible to receive the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 1 of Block 3 of a transcript or an affidavit with an address.

SIGNATURE: Tamas Zafir
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR