## 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 # K73285

PRIMAVERA IMPORT & EXPORT, INC.

Princ	ipai Place of Busines	;
2357	S.W. 132ND CT.	
IIAMI	FL 33186-6412	

Mailing Address

## **FILED** Feb 08, 1999 8:00 am Secretary of State

02-08-1999 90039 045 \*\*\*150.00



357 S.W. 132ND CT.  AMI FL 33186-6412		12357 S.W. 132ND CT. MIAMI FL 33186-6412			•		
						IN THIS SPACE	
					3. Date Incorporated or Qualifed		
					03/16/1989		
. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied	l For
		26			65-0105757	Not App	plicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				□ \$8.75 Additi	
City & Sta	te	City & State			<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>	S5.00 May Added to Fe	
Zip	Country 25	Zip	Countr	у	This corporation owes the current Personal Property Tax.	t year intangible AYes	
	g. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	
	The strain has been		81	1 Name		<del> (</del>	
CAL 1435	ui, John 58 S. W. 96 Terr.	.,	. 82	2 Street Ad	dress (P.O. Box Number is Not Acceptable	e)	
	VII FL 33186		83	3	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	到1980年 · 图图:	14. 53.
	•			4 City	10.00 (10	85 Zip Code	41. (\$\$) (**********************************
			84	4 City		FL 85 Zip Code	7
	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligation	and 607.1508, Florida Statute of Florida. Such change was au ions of, Section 607.0505, Flor	es, the abov uthorized by rida Statute	ve-named co y the corpora s.	rporation submits this statement for the pution's board of directors. I hereby accept	rpose of changing its regis the appointment as registe	stered ered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Age	ent signature requ	ired when reinstating)	DATE	
2.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS I	IN 12
TLE	P	☐ DELETE	1.1 TITLE		F 4 M+ 754		Addition
AME	CALUI, JOHN		1.2 NAME	ļ	• • • • • • • • • • • • • • • • • • • •		
TREET ADDRESS			1.3 STREE	ET ADDRESS			
ITY-ST-ZIP	MIAMI FL		1.4 CITY-5	ST-ZIP		<u> </u>	
TLE		☐ DELETE	2.1 TITLE			Change [	Addition
AME			2.2 NAME				
TREET ADDRESS			2.3 STREE	ET ADDRESS			
ITY-ST-ZIP			2. 4 CITY-	ST-ZIP			
TLE		☐ DELETE	3.1 TITLE			☐ Change ☐	Addition
AMES ( )	Barrier Commence		3.2 NAME				
TREET ADDRESS				ET ADDRESS		ا ماريونونونون و المريونونونونونونونونونونونونونونونونونونون	119
ITY-ST-ZIP	[4] 程 [1] (2) (2)		3.4. CITY-				
MLE		☐ DELETE	4.1 TITLE			Change .	Addition
AME			4. 2 NAME	.		•	•
TREET ADDRESS	12.			ET ADDRESS			
ITY-ST-ZIP		4 ; (-	4.4 CITY-	· 1			
TLE		☐ DELETE	5.1 TITLE			Change	Addition
AME	Į.	<u> </u>	5.2 NAME				_
AME TREET ADDRESS							
	d *		5.3 STREE			•	
	p			ET ADDRESS	•		
TY-ST-ZIP			5.4 CITY-	ET ADDRESS ST-ZIP	1. 数1	□ Change □	7 Addition
TLE	Service of the servic	. DELETE	5.4 CITY-1	ET ADDRESS ST-ZIP	•	☐ Change	Addition
		DELETE	5.4 CITY-: 6.1 TITLE 6.2 NAME	ET ADDRESS ST-ZIP	•	Change ☐	Addition

14. I hereby certify that the information supplied with this filing these 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 armual report is the 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 cartifyer at trystee ampowered 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 true an address, with all other like empowered.

**SIGNATURE** 

CITY-ST-ZIP

NING OFFICER OR DIRECTOR