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

PROFIT CORPORATION ANNUAL REPORT

1999



Secretary of State DIVISION OF CORPORATIONS

FILED Feb 19, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE **Katherine Harris** 02-19-1999 90037 022 ***150.00

i. Corporation	MENT # L45973 MPORT SALES & SERVICE						
Principal Place of Business Mailing Address						i Albii Aldii albii al	All A180 (20)
•	ER GARDEN ROAD		5525 OLD WINTER GARDEN ROAD		DO NOT WRITE IN THI	IS SPACE	•
					3. Date Incorporated or Qualifed 01/22/1990		
2. Principal Pl	2a. Mailing Address			4. FEI Number	Apr	lied For	
21		26			58-1867957		Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 A		
22		27			Fee Rec	· -	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 M Added to		
Zip	Country	Zip	Cou	ntry	This corporation owes the current year I Personal Property Tax.		□No
24	25	29	30		10. Name and Address of New Registere		
	9. Name and Address of Curre	nt Registered Agent		81 Name	To. Hearing and Hearing Street		
	RIGUEZ, IGNACIO			82 Street Add	dress (P.O. Box Number is Not Acceptable)		
5525 OLD WINTER GARDEN ROAD ORLANDO FL 32811				Silect Add	diess (1 .c. box (tallibo) to tall temperatury		
				83			
				84 City		85 Zip C	ode, _
				/	rporation submits this statement for the purpose	L	
office or re agent. I as	egistered agent, or both, in the Stat m familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florida. Such change was lations of, Section 607.0505, Fl	autnorized orida Stati	i by the corpora utes.	ired when reinstating) DATE		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR Change	RS IN 12
TITLE	P	☐ DELETE	1.1 ΤΓ			Change	CJ Addition
NAME	IGNACIO RODRIGUEZ		1.2 NA				{
STREET ADDRESS	5525 OLD WINTER GARDEN			REET ADDRESS			
CITY-ST-ZIP	ORLANDO FL	☐ DELETE	1.4 CI 2.1 TI	TY-ST-ZIP		☐ Change	☐ Addition
TITLE		C better	2.1 N			_ ,	_
NAME				REET ADDRESS	•		
STREET ADDRESS				ITY-ST-ZIP	St. Comments		}
CITY-ST-ZIP		☐ DELETE	3.1 TI			☐ Change	Addition
NAME			3.2 N/	AME			
STREET ADDRESS			3.3 ST	REET ADDRESS			}
CITY-ST-ZIP			3.4. C	ITY-ST-ZIP	·		
TITLE		☐ DELETE	4.1 TI	TLE		☐ Change	☐ Addition
NAME			4.2 N	AME			.
STREET ADDRESS			4.3 S	TREET ADDRESS			·
CITY-ST-ZIP				TY-ST-ZIP			Addition
TITLE		☐ DELETE	5,1 TI			Change	L Addition
NAME			~ ± · 5.2 N/	1	and the second of the second o		
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP		☐ DELETE	5.4 C			☐ Change	Addition
TITLE			6.2 N				_
NAME			1	TREET ADDRESS			
STREET ADDRESS	1		0.5 5	INGLI ADDRESS			

14. I hereby certify that the information supplied with this filing does not quality 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 strue 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 of the secure 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 ether like empowered.

SIGNATURE:)

SNAT10 2.2.99