

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2007 08:00 AM
Secretary of State

DOCUMENT # M02653		
1. Entity Name WILKINSON EXPORT CORP.		
Principal Place of Business 6934 NW 51 STREET MIAMI FL 33166 US		Mailing Address P.O. BOX 6850 MIAMI FL 33152 US



2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

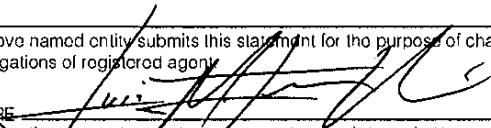
1st MOORE CR2E034 (10/06)

City & State	City & State	4. FEI Number 59-2426381	Applied For ☐ Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
ISAZA, LUIS FERNANDO 4910 NW 102 AVE. #104 MIAMI FL 33178	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

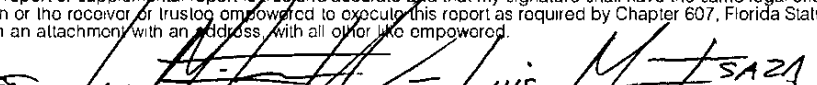
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	PD ☐ Delete
NAME	ISAZA, LUIS FERNANDO
STREET ADDRESS	4910 N.W. 102 AVE, APT #104
CITY - ST - ZIP	MIAMI FL 33178
TITLE	D ☐ Delete
NAME	ISAZA, RITA W.
STREET ADDRESS	6545 N.W. 171 STREET
CITY - ST - ZIP	MIAMI FL 33015
TITLE	MT ☐ Delete
NAME	ISAZA, LUIS MIGUEL
STREET ADDRESS	175 S.E. 25TH ROAD, APT #5-D
CITY - ST - ZIP	MIAMI FL 33129
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

000000732664 ☐ Change ☐ Addition
05/09/07-80055-011 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE 	Date 4/22/07 30x594-2147
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	