
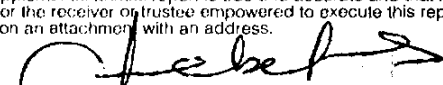


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 03 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # M31028 (7) 1. Corporation Name M. & E. IMPORT & EXPORT, INC.					
Principal Place of Business 168 S.E. 1ST MIAMI FL 33131 US			Mailing Address 168 S.E. 1ST MIAMI FL 33131 US		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/22/1986	
21 Suite, Apt. #, etc.	22 City & State	23 Zip	24 Country	25	26
21 Suite, Apt. #, etc.		22 City & State		23 Zip	
24 Country		25		26	
9. Name and Address of Current Registered Agent GARCIA, MILTON R. 432 BINCANA ISL DR N MIAMI BEACH FL 33160			10. Name and Address of New Registered Agent		
81 Name			82 Street Address (P.O. Box Number is Not Acceptable)		
83			84 City		
85 Zip Code			FL		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	NAME	GARCIA, ERNESTINA	1.1 TITLE	1.2 NAME
STREET ADDRESS	168 SE 1ST	CITY-ST-ZIP	MIAMI FL	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
TITLE	VP	NAME	GARCIA, MILTON R.	2.1 TITLE	2.2 NAME
STREET ADDRESS	168 SE 1ST	CITY-ST-ZIP	MIAMI FL	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
TITLE	T	NAME	GARCIA, MILTON D.	3.1 TITLE	3.2 NAME
STREET ADDRESS	168 S.E. 1ST	CITY-ST-ZIP	MIAMI FL	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE	S	NAME	GARCIA, ANABEL Y.	4.1 TITLE	4.2 NAME
STREET ADDRESS	168 S.E. 1ST	CITY-ST-ZIP	MIAMI FL	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE		NAME		5.1 TITLE	5.2 NAME
STREET ADDRESS		CITY-ST-ZIP		5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE		NAME		6.1 TITLE	6.2 NAME
STREET ADDRESS		CITY-ST-ZIP		6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
14. 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 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 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE: 			3/25/98 3053585380		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone # 0177845		



DO NOT WRITE IN THIS SPACE

CR2E034 (10/97)