

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 11, 2007 08:00 AM
Secretary of State

DOCUMENT # P03000054700

1. Entity Name
AMERICAN SUISSE IMPO-EXPO, INC.



Principal Place of Business
C/O WORLD FINANCIAL GROUP
1978 NORTH EAST 149 STREET
NORTH MIAMI, FL 33181 US

Mailing Address
C/O WORLD FINANCIAL GROUP
1978 NORTH EAST 149 STREET
NORTH MIAMI, FL 33181 US



02052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
55-0876918

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATIVE OFFICES
1978 NE 149 STREET
N. MIAMI, FL 33181

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME SCHIUMERINI, JUAN CARLOS
STREET ADDRESS 1978 NORTH EAST 149TH STREET
CITY-ST-ZIP NORTH MIAMI, FL 33181

TITLE D
NAME CERUELOS-PUMPIDO, RAFAEL
STREET ADDRESS 1978 NORTH EAST 149 STREET
CITY-ST-ZIP NORTH MIAMI, FL 33181

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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04/20/07-80028-012 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: *

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-07

Date

Daytime Phone #