

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90071 026 ***158.75

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1. Entity Name
IMPORTEX GROUP, INC.



Principal Place of Business
945 SOUTH FEDERAL HWY
DEERFIELD BEACH, FL 33441

Mailing Address
945 SOUTH FEDERAL HWY
DEERFIELD BEACH, FL 33441

40099351



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04282007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

20-0070529

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TAVARES NOGUEIRA, ANTONIO M
1040 CRYSTAL LAKE DR #2
POMPANO BCH, FL 33064

7. Name and Address of New Registered Agent

Name
ANTONIO M. TAVARES NOGUEIRA

Street Address (P.O. Box Number is Not Acceptable)
1008 S.W. 42ND AVENUE

DEERFIELD BEACH FL 33442

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
NAME
STREET ADDRESS
CITY-ST-ZIP
DPT
TAVARES NOGUEIRA, ANTONIO M
1040 CRYSTAL LAKE DR #2
POMPANO BCH, FL 33064 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVS
NOGUEIRA, ANA CELIA
1040 CRYSTAL LAKE DR #2
POMPANO BCH, FL 33064 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/T/D
ANTONIO M. TAVARES NOGUEIRA
1008 S.W. 42ND AVENUE
DEERFIELD BEACH, FL 33442 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V/S/D
ANA CELIA NOGUEIRA
1008 S.W. 42ND AVENUE
DEERFIELD BEACH, FL 33442 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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, 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

ANTONIO M. TAVARES NOGUEIRA 04/27/07 954-421-4833