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

FILED PROFIT Feb 10 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # P39316 (5) DETERGENT EXPORT & MARKETING SERVICES INC. Principal Place of Business Mailing Address % M. YUDIN. % M. YUDIN. 20355 NE 34TH COURT, APT. 1024 20355 NE 34TH COURT, APT, 1024 DO NOT WRITE IN THIS SPACE NO. MIAMI BEACH FL 33180 NO. MIAMI BEACH FL 33180 3. Date Incorporated or Qualified 06/16/1992 2. Principal Place of Business 2a. Mailing Address Applied For 65-0337936 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. ☐ Yes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name YUDIN, MICHAEL 20355 NE 34TH CT. APT. 1024 - DELVISTA 82 Street Address (P.O. Box Number is Not Acceptable) NORTH MIAMI BEACH FL 33180 83 84 City Zip Code 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 Horida. 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. (NOTE: Registered Agent signature required when reinstaling) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE YUDIN, MICHAEL 12 NAME NAME 20355 NE 34TH CT #1024 STREET ADDRESS 1.3 STREET ADDRESS N. MIAMI BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE. 21 TITLE FORMAN, STEPHANIE NAME 2.2 NAME 3811 N. 43RD AVE. STREET ADDRESS 2.3 STREET ADDRESS HOLLYWOOD FL CITY - ST - ZIP 2. 4 CITY - ST- ZIP DELE ?E Change Addition TITLE 3.1 TITLE NAME 32 NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing closs 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 all actiment with an address

SIGNATURE:

**Table 19.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certified in Section 119.07(3)(i). Florida Statutes. I further certified in Section 119.07(3)(i). Florida Statutes. I further certified in Section 119.07(3)(i). Florida Statutes.

5.1 TITLE

5.2 NAME

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6.2 NAME

53 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

5 4 CHTY-ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE MALAF

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

DELETE

DELETE

JAN 29,1558

Change

Change

Addition

Addition