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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200000011 (6)

AMALGAMATED EXPORTERS, INC.

FILED Feb 05 1997 8:00am Secretary of State

Principal Place 14613 S.W. 154 VICTORIA PARC MIAMI FL 3319	TH COURT	Mailing Address 14613 S.W. 154TH COL VICTORIA PARC MIAMI FL 331864629	JRT				
				 Date Incorporated or Qualified 10/23/1992 	3a. Date of Last F 03/21/1996		
2. Principal Pa 21	ace of Business	2a. Mailing Address		4. FEI Number 65-0366135	 	Applied For Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75	\$8.75 Additional	
City & State City & State				6. Election Campaign Financing		.00 May Be	
23		28		Trust Fund Contribution	Added Added	to Fees	
Zip 24	Country 25	Zip 29	Country 30		Yes No	s. 199.032,	
	9. Name and Address of Cu	rent Registered Agent		10. Name and Address of New F	Registered Agent		
KING, RUDOLPH N 14613 S.W. 154TH COURT VICTORIA PARC MIAMI FL 33196			81 Name 82 Street 83 84 City	Address (P.O. Box Number is Not Accept	,) Code	
SIGNATURE 12. TITLE NAME	Signature, typics or purited name of registers OFFICERS P KING, RUDOLPH N	Jagent and tire if applicable (f AND DIRECTORS	VOTE Registered Agent signature 13. 1.1 TITLE 1.2 NAME	required when reinstairig) ADDITIONS/CHANGES TO OFF	DATE ICERS AND DIRECTO Change		
STREET ADDRESS CITY-S1-ZIP	14613 S.W. 154TH COURT MIAMI FL 33196	VICTORIA PARC	1.3 STREET ADDRESS				
TITLE NAME STREET ADDRESS	ST KING, CONRAD G 14613 S.W. 154TH COURT	UCTORIA PARC	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS		Change	Addition	
CITY-S1-ZIP TITLE NAME STREET ADDRESS	MIAMI FL 33196	☐ DELETE	2 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		☐ Change	Addition	
TITLE NAME STREET ADDRESS		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS		Change	Addition	
DITY-ST-ZIF* TITLE NAME STREET ADDRESS		DELETE	4.4 CITY - ST - 2IP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Change	Addition	
CITY-ST-ZIP TITLE		☐ DEL€TE	5 4 CITY - ST - ZIP 6.1 TIFLE 6.2 NAME		Change	Addition	
STREET ADDRESS CITY-ST-ZIP	or order that the information sun	ntied with this bling does not au	6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	stated in Section 119.07(3)(i). Florida Statu	too I further continue the	nt tho	

4. I do 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 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 changes, or p an attachment with an address.

SIGNATURE:

AUDOLPH N. KINA

1/31/97 305 233 572