


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

FILED

Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P93000018506 (4)**

1. Corporation Name

OFFICIAL IMPORT & EXPORT, INC.



Principal Place of Business

Mailing Address

~~1002 EAST 21ST STREET~~
~~HALEAH FL 33013~~

~~1002 EAST 21ST STREET~~
~~HALEAH FL 33013~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/11/1993

4. FEI Number

65-0394449

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 **9900 S.W. 102 STREET**

Suite, Apt. #, etc.

22

City & State

23 **MIAMI FLORIDA**

Zip

24 **33176**

Country

25 **USA**

26 **9900 S.W. 102 STREET**

Suite, Apt. #, etc.

27

City & State

28 **MIAMI, FLORIDA**

Zip

29 **33176**

Country

30 **USA**

9. Name and Address of Current Registered Agent

~~JONES, DULCE~~
~~1002 EAST 21 ST.~~
~~HALEAH FL 33013~~

10. Name and Address of New Registered Agent

81 Name

ARELIS JONES

82 Street Address (P.O. Box Number is Not Acceptable)

9900 S.W. 102 STREET

83

84 City

MIAMI

FL

85 Zip Code
33176

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PST** ☒ DELETE

NAME ~~JONES, DULCE~~

STREET ADDRESS ~~1002 EAST 21ST ST.~~

CITY-ST-ZIP ~~HALEAH FL 33013~~

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P, S, T** ☐ Change ☒ Addition

1.2 NAME **ARELIS JONES**

1.3 STREET ADDRESS **9900 S.W. 102 STREET**

1.4 CITY-ST-ZIP **MIAMI FLORIDA 33176**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

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: *[Signature]*

2/12/98

305-553-4333

CR2E034 (10/97)