

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 22 1998 8:00am  
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P93000023943 (2)

1. Corporation Name  
 BESTONE EAST COAST USA CORP.



Principal Place of Business  
 8433 NW 68TH ST  
 MIAMI FL 33166  
 US

Mailing Address  
 8433 NW 68TH ST.  
 MIAMI FL 33168-2649  
 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 21 7091 NW 82 AVENUE  
 Suite, Apt. #, etc.  
 22  
 City & State  
 23 MIAMI - FLORIDA  
 Zip Country  
 24 33166 U.S.A.

2a. Mailing Address  
 26 7091 NW 82 AVENUE  
 Suite, Apt. #, etc.  
 27  
 City & State  
 28 MIAMI - FLORIDA  
 Zip Country  
 29 33166 U.S.A.

3. Date Incorporated or Qualified  
 03/31/1993

4. FEI Number  
 65-0399924  
 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

9. Name and Address of Current Registered Agent  
 CRUZ, FELIX D  
 780 NW LEJEUNE RD  
 STE 427  
 MIAMI FL 33126

10. Name and Address of New Registered Agent  
 81 Name  
 POLANCO HAROLD  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83 7091 NW 82 AVENUE  
 84 City MIAMI FL 85 Zip Code 33166

11. Pursuant to the provisions of sections 607.0001 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]* DATE: 07/1/98

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	POLANCO, HAROLD	
STREET ADDRESS	8433 NW 68TH ST	
CITY-ST-ZIP	MIAMI FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BONENTE, FAUSTO	
STREET ADDRESS	8433 NW 68TH ST	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	POLANCO, HAROLD	
1.3 STREET ADDRESS	7091 NW 82 AVENUE	
1.4 CITY-ST-ZIP	MIAMI - FLORIDA	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	BONENTE, FAUSTO	
2.3 STREET ADDRESS	7091 NW 82 AVENUE	
2.4 CITY-ST-ZIP	MIAMI - FLORIDA	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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]* DATE: 07/1/98 (335)5935292

CR2E034 (5/98)