

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

FILED  
Jan 30 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 # P93000042063 (6)

1. Corporation Name

ALEXANDER H. FACTORS INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

9300 NORTHWEST 58TH STREET  
SUITE 209  
MIAMI FL 33178

9300 NORTHWEST 58TH STREET  
SUITE 209  
MIAMI FL 33178

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/09/1993

4. FEI Number

65-0421881

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

10. Name and Address of New Registered Agent

QUANT, EDUARDO M  
9300 N.W. 58 STREET  
STE. 209  
MIAMI FL 33178

81 Name

MANUEL COHEN

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

9300 NW 58TH STREET

83

STE. 209

84 City

MIAMI

FL

85 Zip Code

33178

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1/26/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE MS  
NAME COHEN, MANUEL  
STREET ADDRESS 9300 NW 58 ST  
CITY-ST-ZIP MIAMI FL

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

Change Addition

TITLE D  
NAME MASFERRER, EDUARDO A  
STREET ADDRESS 6971 SOUTHWEST 79TH AVENUE  
CITY-ST-ZIP MIAMI FL 33143

DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

Change Addition

TITLE D  
NAME MARINAKIS, JUAN  
STREET ADDRESS 15 CALLE I-11 ZONA 10 UE  
CITY-ST-ZIP GUATAMALA CITY GUATAMALA

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

Change Addition

TITLE D  
NAME NITZBERG, MAX  
STREET ADDRESS 39 NORTH WOODS LANE  
CITY-ST-ZIP BOYNTON BEACH FL

DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Change Addition

TITLE D  
NAME MARTINELLI, GUIDO  
STREET ADDRESS V. ESPANA, EDIF BNP LOCAL 14  
CITY-ST-ZIP PANAMA REP. OF PANAMA

DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change Addition

TITLE MS  
NAME QUANT, EDUARDO  
STREET ADDRESS 9300 N.W. 58 STREET, STE. 209  
CITY-ST-ZIP MIAMI FL

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

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:

CHRISTOPHE BROCHANE, VP 1/26/98 (305) 593-5302

CR2E034 (10/97)