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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DIVISION OF DOCUMENT # P93000086320 (7)

NETUNO IMPORT, INC.

| Principal Place of Durings | | | | | | | | | | | | | | | |
|---|-------------------|-----------------------|--------------------------------|--|-------------------------------|--|---------------|-----------------------|---|--|-----------|-------------|---------------|-------------|---------|
| Principal Place of Business Mailing Address | | | | | | | | ļ | | | | | | ,, | |
| | 2890 SW 65T | H AVE | | 22890 SW 65TH AVE STE D | | | | l | | | | | | | |
| | te d Oca raton | FI 33428 | | BOCA RATON FL 33428-6052 | | | | | | | | | | | |
| ľυ | | 16 00160 | | US | | | | ŀ | 3. Date Inco | rporated or Quali | fied | 3a. Da | le of Last I | Report | |
| | | | | | | | | | 12/13/1 | 993 | | | 18/1996 | , | |
| 2. | Principal Pl | lace of Business | | 2a. Mailing Address | | | | | 4. FEI Numb | | | | | pplied For | |
| 21 | | | | 26 | | | İ | 65-04 | 52119 | | | - | ot Applica | | |
| | Suite Apt. | #. etc. | Suite, Apt. #, etc. | | | | | | | . 1 | | \$8.75 | Additional | $\neg \neg$ | |
| 22 | | | | 27 | | | ļ | 5. Certificate | of Status Desire | a ı | | Fee F | lequired | l | |
| | City & State | 9 | City & State | | | 1 | 6. Election C | Campaign Financi | กต | | \$5.00 | May Be | | | |
| 23 | | | | 28 | | | | Trust Fun | d Contribution | [| | | to Fees | | |
| | Zφ | Country Zip | | | Co | Country | | | 8. This corp | oration has liabilit | y for int | angible | tax under | s. 199.032 | |
| 24 | | 25 | | 29 | 30 | | | | Florida St | atutes | | Yes [|] No | | |
| | | g, Name and | Address of Current | | 1_ | Name and Address of New Registered Agent | | | | | | gent | | | |
| | LUC | HANO, BONAL | DO. | | 81 | Nam | 9 | | | | | | | ı | |
| | 228 | 90 SW 65TH A | NE | | 82 | Stree | t Addres | s (P.O. Boy N | umber is Not Acc | entable | Υ | | | \dashv | |
| | B00 | CA RATON FL | 33428 | | 500 | | | (1,00,00 | , | | cpiasio, | , | | | |
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| | | | | | | 84 | City | | | | | FL | 85 Zip | Code | |
| 1 | I. Pursuant | to the provisions | of Sections 607.0502 | and 607.1508, Florida S | tatutes, the | voda | e-name | d corpor | ration aubmits | this statement for | the pur | | changing | ts register | red |
| ' | office or r | egistered agent, | or both, in the State o | and 607.1508, Florida S of Florida. Such change v ions of, Section 607.050 | was authoriz 5. Florida St | ed by | y the co | rporation | n's board of di | rectors. I hereby | accept t | the app | ointment a | s registere | d l |
| l | | in izaniliai witii, e | and accept the obligat | ions of, become ov, book | o, monda ot | atute | . | | | | | | | | ľ |
| S | GNATURE | Signature Typod or pr | inted name of registered agent | and title if applicable | (NOTE: Register | ed Age | ent signate | re required | when reinstating) | | | DATE | | | |
| 1: | 2. | | OFFICERS AND | DIRECTORS | 13 | | | | ADDITION | S/CHANGES TO | OFFICE | RS AND | DIRECTO | RS IN 12 | |
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14. 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 arinual 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

NATURE AND TYPED OR PRINTED NAME OF STONING OFFICER OR DIRECTOR

4/3/92 (56) 883-528 6

FILED

Apr 10 1997 8:00am

Secretary of State