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

Mailing Address

14354 TAMBOURINE DR.

Profit Corporation Annual Report

1997

Principal Place of Business
14954 TANROURINE DR

SIGNATURE



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 02 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000025571 (8)

IN IMPORT & EXPORT, INC.

ORLANDO FL \$2837-7088 ORLANDO FL 32837 3. Date Incorporated or Qualified 3a. Date of Last Report 04/04/1994 07/02/1996 2. Principal Prace of Business 2a. Mailing Address 4. FEI Number Applied For 59-3233622 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032. Yes No 29 30 Florida Statutes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DE ARAUJO, ISRAEL A 14354 TAMBOURINE DR. Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32837 83 84 City Zip Code 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. Land familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. 0425/97 SIGNATURE (NOTE: Registered Agent signature required when reinstating) RS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12 13. DELETE Change Addition 1.1 TITLE THILE DE ARAUJO, ISRAEL ALMEIDA NAMI 1.2 NAME 14354 TAMBOURINE DR. STREET ACIDRESS 1.3 STREET ADDRESS ORLANDO FL 32837 1.1 CITY - ST-ZIP VSD DELETE Change Addition THEF 21 TITLE DE ARAUJO, NORMA VALERIA A 22 NAME 14354 TAMBOURINE DR. STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 32837 CITY -ST-70 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS City SI-7P 3.4. CITY - ST- ZIP DELETE Change Addition HILE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET AUDRESS CITY - \$1 - 70P 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition THUE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - 70P 5.4 CITY-ST-ZIP DELETE Change Addition 61 TITLE 111. F 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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

k 13 il changed, or on an attachment with an address.

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 ham an officer or director if the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name