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Jan 23 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # **P94000040876 (2)**

1. Corporation Name
TOPAZ EXPORT AND IMPORT, CORP.

Principal Place of Business	Mailing Address
1923 S.W. 107TH AE. UNIT 108 MIAMI FL 33165	1923 S.W. 107TH AE. UNIT 108 MIAMI FL 33165-7346

3. Date Incorporated or Qualified: 06/01/1994
3a. Date of Last Report: 02/20/1996

2. Principal Place of Business
21: 9500 S.W 97th St
Suite/Apt. #, etc. 22: Suite #240
City & State 23: Miami, FL
Zip 24: 33144 Country 25:

2a. Mailing Address
26: JAME AS
Suite, Apt. #, etc. 27: ABOVE
City & State 28:
Zip 29: Country 30:

4. FEI Number: 65-0496275 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

MENES, NURELLA
1923 S.W. 107TH AVE.
UNIT 108
MIAMI FL 33165

10. Name and Address of New Registered Agent

81 Name: JOSE C. CHIZIK.
82 Street Address (P.O. Box Number is Not Acceptable): 9500 SW 97th St.
83: Suite #240
84 City: Miami FL 85 Zip Code: 33144

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] (NOTE: Registered Agent signature required when reinstating) DATE: 1-09-97

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☑ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	ROTHSHTEIN, ADRIAN C		1.2 NAME	
STREET ADDRESS	CALLE CONESA 2235, 9TH FLOOR		1.3 STREET ADDRESS	
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA		1.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	CHIZIK, JOSE C		2.2 NAME	
STREET ADDRESS	JEAN JAURES 383, 7TH FLOOR, APT. #27		2.3 STREET ADDRESS	
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA		2.4 CITY-ST-ZIP	
TITLE	VD	☑ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	DINER, FABIAN G		3.2 NAME	
STREET ADDRESS	AVENIDA SAN MARTIN 5954		3.3 STREET ADDRESS	
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA		3.4 CITY-ST-ZIP	
TITLE	~~SD~~	☑ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	~~MENES, NURELLA~~		4.2 NAME	
STREET ADDRESS	~~1923 S.W. 107TH AVENUE, UNIT #108~~		4.3 STREET ADDRESS	
CITY-ST-ZIP	~~MIAMI FL 33165~~		4.4 CITY-ST-ZIP	
TITLE	VD	☐ DELETE	5.1 TITLE	☐ Change ☑ Addition
NAME	LEVINSON VIVIANA		5.2 NAME	
STREET ADDRESS	JEAN JAURES 383 7TH FLOOR		5.3 STREET ADDRESS	
CITY-ST-ZIP	BUENOS AIRES, ARGENTINA		5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (9/96)

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 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] 1-09-97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0222127