FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED
95 MAY -1 AM 5:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000060403 (0)

1. Corporate Name
B.M.W. INC.

Principal Place of Business	Mailing Address
742 W. MCNAB ROAD FT. LAUDERDALE FL 33309	742 W. MCNAB ROAD FT. LAUDERDALE FL 33309

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/11/1994
3a. Date of Last Report:

4. FEI Number: 65-0509708 — Applied For / Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / County (25)	Zip (29) / County (30)

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	10. Name and Address of New Registered Agent
BURGOS, MANUEL 572 NW 53RD AND DELRAY BEACH FL 33445	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1-1 TITLE	☐ Change ☐ Addition
NAME	BURGOS, MANUEL	1-2 NAME	
STREET ADDRESS	572 NW 53RD AVE.	1-3 STREET ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL 33445	1-4 CITY-ST-ZIP	
TITLE	D	2-1 TITLE	☐ Change ☐ Addition
NAME	BURGOS, WILSON	2-2 NAME	
STREET ADDRESS	2119 N.W. APPLE	2-3 STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL 60647	2-4 CITY-ST-ZIP	
TITLE		3-1 TITLE	☐ Change ☐ Addition
NAME		3-2 NAME	
STREET ADDRESS		3-3 STREET ADDRESS	
CITY-ST-ZIP		3-4 CITY-ST-ZIP	
TITLE		4-1 TITLE	☐ Change ☐ Addition
NAME		4-2 NAME	
STREET ADDRESS		4-3 STREET ADDRESS	
CITY-ST-ZIP		4-4 CITY-ST-ZIP	
TITLE		5-1 TITLE	☐ Change ☐ Addition
NAME		5-2 NAME	
STREET ADDRESS		5-3 STREET ADDRESS	
CITY-ST-ZIP		5-4 CITY-ST-ZIP	
TITLE		6-1 TITLE	☐ Change ☐ Addition
NAME		6-2 NAME	
STREET ADDRESS		6-3 STREET ADDRESS	
CITY-ST-ZIP		6-4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07, 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 of this report or on an attachment with an address.

SIGNATURE: [signature] 5/1/95 (305-972-6950)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE

0217696 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

APPROVED AND FILED

DOCUMENT # P94000060491 (5)

1. Corporate Name

ENTERPRISE TRADING CORPORATION

Principal Place of Business: 2 S BISCAYNE BLVD SUITE 2975, MIAMI FL 33131

Mailing Address: 2 S BISCAYNE BLVD SUITE 2975, MIAMI FL 33131

3. Date Incorporated or Qualified: 08/17/1994

4. FEI Number: 65-0517689

5. Certificate of Status Desired [x] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

2. Principal Place of Business: 6950 Okeechobee Blvd., W. Palm Beach, FL, USA

2a. Mailing Address: 6950 Okeechobee Blvd., W. Palm Beach, FL, USA

9. Name and Address of Current Registered Agent

MACDANIEL, JOHN M
2 S BISCAYNE BLVD SUITE 2975
ONE BISCAYNE TOWER
MIAMI FL 33131

10. Name and Address of New Registered Agent

Name: John M. MacDaniel, P.A.
Street Address: 2 S. Biscayne Blvd., # 2975
City: Miami FL Zip Code: 33131

11. Signature: [signature] 4/26/95

12. Officers and Directors

D
DE SOUZA, VILMAR P
RUA AURELLANO COUTINHO 258 APT 83
SAO PAULO BRAZIL

13. Additions/Changes to Officers and Directors

[x] Addition
Vice President
Ricardo Najar
2306 Cypress Bend Drive South, # 120-B
Pompano Beach, FL 33069

14.

SIGNATURE: x [signature] x 04.01.95 x 305-970-7241

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0120194 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

TALLAHASSEE, FLORIDA

DOCUMENT # **P94000060503 (7)**

1. Corporation Name

MARCON INC.

Principal Place of Business: 7540 OVERLOOK DR, LAKE WORTH FL 33467

Mailing Address: 7540 OVERLOOK DR., LAKE WORTH FL 33467

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/17/1994

3a. Date of Last Report

4. FEI Number: 65-0520280 — Applied For / Not Applicable

5. Certificate of Status Desired [X] — $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

2. Principal Place of Business — 2a. Mailing Address

9. Name and Address of Current Registered Agent

NOETH, RAYMOND A
7540 OVERLOOK DR.
LAKE WORTH FL 33467

10. Name and Address of New Registered Agent

Name:

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

City: FL — 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. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RAYMOND A. NOETH PRES. 7540 OVERLOOK DR. LW FLA 33467
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DAVE VALARI V.P. SAME ADDRESS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[ ] Change [ ] Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and 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: Raymond A. Noeth Director — 3/30/95 — 968 7460 (407)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

0272710 CP