

FILE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

FILED

Apr 17 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000067423 (1)

1. Corporation Name

INDO-AMERICAN IMEX TRADERS CORPORATION

Principal Place of Business

C/O BLOOM & ASSOCIATES  
13899 BISCAYNE BLVD., SUITE 105  
MIAMI FL 33181  
US

Mailing Address

C/O BLOOM & ASSOCIATES  
13899 BISCAYNE BLVD., SUITE 105  
MIAMI FL 33181  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/14/1994

4. FEI Number

65-0521192

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

2. Principal Place of Business

21 16375 NE 18th Ave.

Suite, Apt. #, etc.

22 330

City & State

23 Miami, Florida

Zip

24 33162

Country

25 USA

2a. Mailing Address

26 C/O BLOOM & ASSOCIATES  
16375 NE 18th Ave.

Suite, Apt. #, etc.

27 330

City & State

28 Miami, Florida

Zip

29 33162

Country

30 USA

9. Name and Address of Current Registered Agent

BLOOM, STUART L  
C/O BLOOM & ASSOCIATES  
13899 BISCAYNE BLVD., STE. 105  
MIAMI FL 33181

10. Name and Address of New Registered Agent

81 Name

82 Stuart L Bloom

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

84 16375 NE 18th Ave. Suite 330

85

City Miami

FL

Zip Code

33162

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

Stuart L Bloom

Stuart L. Bloom

4/13/98

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DPS  
FOO, GODFREY R  
6425 COW PEN ROAD P-101  
MIAMI LAKES FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DT  
FOO, CHRISTINA W  
6425 COW PEN ROAD P-101  
MIAMI LAKES FL

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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

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

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

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

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

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

GODFREY R. FOO

GODFREY R. FOO

04/13/98

827-1645

CR2E034 (10/97)