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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P94000070515 (9)

FILED Jan 28 1998 8:00am Secretary of State

SHIMA IMPORT, CORP. Principal Place of Business Mailing Address 7253 NW 54TH ST. 7227 NW 54TH ST MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE HS 3. Date Incorporated or Qualified 09/26/1994 2. Principal Place of Business 2a. Mailing Address 4. FFI Number Applied For 21 26 65-0521834 Not Applicable _#_etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MACEDO, CARLOS 8870 SW 40TH ST. #3 Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33165** 84 City 85 Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition MARICHAL, MERCEDES NAME 1.2 NAME STREET ADDRESS 9297 SW 35TH ST. 1.3 STREET ADDRESS **MIAMI FL 33165** CITY - ST - ZIP 1.4 CITY - ST-ZIP DELETE Change __ Addition TITLE 2.1 TITLE MARICHAL, ADAN 2.2 NAME 9297 SW 35TH ST. STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33165** 2.4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition MARICHAL, VANESSA MARKE 3.2 NAME 9297 SW 35TH ST. STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33165 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.7 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE Addition TITLE 5.1 TITLE ☐ Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 of the corporation of the corpo