

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
OFFICE OF CORPORATE SERVICES

55 MAY -1 AM 3:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000081342 (5)

To: Corporation Name

ARGENT IMPORT-EXPORT INC. U.S.A.

Principal Place of Business

15322 SW 60TH LANE  
MIAMI FL 33193

Mailing Address

15322 SW 60TH LANE  
MIAMI FL 33193

Do Not Write In This Space

3. Certificate of Incorporation or Charter 3a. Date of Last Report  
11/03/1994

2. Principal Place of Business

21

2a. Mailing Address

26

4. Filing Number

65-0536116

Applied For

Not Applicable

22. State Appointed

22

27. State Appointed

27

5. Certificate of Status (Newest)

\$8.75 Additional  
Fee Required

23. City & State

23

28. City & State

28

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

24. City

24

25. City

25

29. City

29

30. City

30

8. Does corporation have liability for state public law under 1994 (1994)  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

DI NOBILE, ABEL  
15322 SW 60TH LANE  
MIAMI FL 33193

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (If C) Box Number is Not Acceptable

B3

B4 City

FL

B5 Zip Code

11. Pursuant to the provisions of Sections 607.02(2) and 607.1509, Florida Statutes, the above named corporation hereby, 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, thereby accept the appointment as registered agent. I am hereby authorized and accept the obligation of Sections 607.02(2) Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director of the Corporation

Signature of Registered Agent or Director of the Corporation

Signature

12. OFFICERS AND DIRECTORS

|                     |                    |
|---------------------|--------------------|
| 12a. Name           | D                  |
| 12b. Name           | DI NOBILE, ABEL    |
| 12c. Street Address | 15322 SW 60TH LANE |
| 12d. City & State   | MIAMI FL 33193     |
| 12e. Name           | D                  |
| 12f. Name           | CAVALLER, OSCAR A  |
| 12g. Street Address | 15322 SW 60TH LANE |
| 12h. City & State   | MIAMI FL 33193     |
| 12i. Name           |                    |
| 12j. Name           |                    |
| 12k. Street Address |                    |
| 12l. City & State   |                    |
| 12m. Name           |                    |
| 12n. Name           |                    |
| 12o. Street Address |                    |
| 12p. City & State   |                    |
| 12q. Name           |                    |
| 12r. Name           |                    |
| 12s. Street Address |                    |
| 12t. City & State   |                    |

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

|                     |                                                                   |
|---------------------|-------------------------------------------------------------------|
| 13a. Name           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13b. Name           |                                                                   |
| 13c. Street Address |                                                                   |
| 13d. City & State   |                                                                   |
| 13e. Name           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13f. Name           |                                                                   |
| 13g. Street Address |                                                                   |
| 13h. City & State   |                                                                   |
| 13i. Name           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13j. Name           |                                                                   |
| 13k. Street Address |                                                                   |
| 13l. City & State   |                                                                   |
| 13m. Name           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13n. Name           |                                                                   |
| 13o. Street Address |                                                                   |
| 13p. City & State   |                                                                   |
| 13q. Name           | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 13r. Name           |                                                                   |
| 13s. Street Address |                                                                   |
| 13t. City & State   |                                                                   |

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 607.02(1)(b) Florida Statutes. I further certify that the information included in 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 registered agent 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 as an attachment with an address.

SIGNATURE:

*Abel Di Nobile*  
SIGNATURE AND TYPER OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
ABEL DI NOBILE (PRESIDENT)

MARCH/25/95