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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9400083662 (4)

C.R.A. EXPORT & IMPORT, INC.

	Principal Place	of Business	Mailing Address					
	11800 N.W. 100 SUITE 5 MEDLEY FL 331		11800 N.W. 100TH ROAD SUITE 5 MEDLEY FL 33178-1037	1				
						3. Date Incorporated or Qualified 11/16/1994	3a. Date of Last R 04/01/1996	eport
l	2. Principal Pla 21	ace of Business	2a. Mailing Address 26			4. FEI Number 65-0550157		plied For t Applicable
Į	Suite, Apt. #	≢, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 / Fee Re	Additional
	City & State		City & State			Etection Campaign Financing Trust Fund Contribution	\$5.00	May Be
Ĺ	Zip 24	Country	Zip 29	Count	try	8. This corporation has liability for		
ŀ	24	25 25 Name and Address of Current		1301		, 10. Name and Address of New Re		
ŀ	ΔRR	EU, CARLOS R		8	1 Name	Varia 12000	0	
	9375	S S.W. 77TH AVENUE		8	12 Street Arid	ress (P.O. Box Number is Not Accepta	ble) Hans	······································
		E 3016 VI FL 33156-7949		- E	1994	40 S.W. 64 Lan	e #305	
				Ē	City M	emi, FL.	FL 85 Zip	Code ろょなつ。
	office or re	o the provisions of Sections 607.0562 sgistered agent or both, in the State on infamiliar with, and accept the obligat	f Florida. Such change was	authorized	ove-named corpora	poration submits this statement for the thor's board of directors. I hereby acce	ourpose of changing it	s registered registered
١	SIGNATURE	Signalaer, typed oc print diname of a giss octoger	a state Lande et a (NO	IF Bookspeed	Agent signature region	red when reinstaling)	DATE	
ŀ	12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTOR	S IN 12
ŀ	TITLE	PST	S DELETE	1.1 Ti[ki	£ \$	BREU, CATLOS R 1810 S. D. 64 Lane	∠ Change	Addition
l	NAME	ABREU, CARLOS R	r	1,2 NAM	ı∈ Á	Breo, carro	#305	
Į	STREET ADDRESS	9375 S.W. 77TH AVENUE, #30	16	1.3 \$14	ET ADDRESS 13	940 5.00.64		
I	Ciffy St ZiP	MIMAI FL 33156		1.4 0113	'-ST-ZIF V	Mami, Pl. 33183)	
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l	NAME			2.2 NAM	IE			
ļ	STREET ADDRESS			23 \$16	EET ADDRESS			
ļ	C-TY - ST - ZIP		Torus		Y-ST-ZIP		110	1 44400
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١	NAME		•	3 2 NAN				
	STREET ADDRESS				EET ADORESS			
ŀ	CITY - ST - ZIP TITLE		DELETE	3.4 CI	Y-ST-ZIP F		Change	Addition
	NAME		Lad Checkle	4.7 MG				
	STREET ADDRESS		•		EET ADDRESS			
	City - ST - ZIP				(-ST-ZIP			
	TITLE		DELETE	5 1 TITL			☐ Change	Addition
	NAMs		-	5.2 NAM	1			
J	STREET ADDRESS				EET ADDRESS			
1	Crity - S1 - ZIP			1	r-ST-ZIP			
	TITLE		DELETE	617171			Change	Addition
	NAME			6.2 NAM			-	
	STREET ADDRESS.				EET ADDRESS			
			n	1 2,211	1			

SIGNATURE:

 I do hereby cert by that the information supplied with this tiling doc information indicated on this annual report or supplemental annual

Lam an officer or director of the corporation appears in Block 12 or Block 13 if charge

NATURE AND THE PROPERTY NAME OF BIGHING OFFICER OF DIRECTOR

that quality in the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the endowered to execute this report as required by Chapter 607, Florida Statutes; and that my name an address.

4/3/47 (305)865-1008

FILED

Jan 16 1997 8:00am

Secretary of State