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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000089869 (9)

FILED May 16 1997 8:00am Secretary of State

1. Corporation Name IMPORTS, INCORPORATED Principal Place of Business 3221 SW 17TH STREET FT LAUDERDALE FL 33312 Mailing Address 3221 SW 17TH STREET FT LAUDERDALE FL 33312-3718							
				3. Date Incorporated or Qualified 12/12/1994		of Last R /1996	eport
_	Place of Business	2a. Mailing Address		4. FEI Number 65-0539813	_ _	J	plied For
Suite, Apt.	# etc	Suite, Apt. #, etc.		00 00390 13		\$8.75 /	l Applicable
22	", 010.	27		5. Certificate of Status Desired		Fee Re	
City & State	Θ	City & Stato		6. Election Campaign Financing		\$5.00	May Be
23		28		Trust Fund Contribution		Added	
Zip	Country	Zip	Country	8. This corporation has liability for			199.032
24	25 9. Name and Address of Curret	29 nt Registered Agent	30	Florida Statutes 10. Name and Address of New Re	Yes Dealstered Ap		
HUL	L, ALBERTA		81 Name			· · · · · · · · · · · · · · · · · · ·	
	1 SW 17TH STREET LAUDERDALE FL 33312		82 Street Ac 83 84 City	ddress (P.O. Box Number is Not Accepta		85 Zip (Code
11. Pursuant	to the provisions of Sections 607.050	D2 and 607,1508, Florida Statu	ites the above-named co	orporation submits this statement for the	FL	hanoing it	s registered
office or r agent. I a SIGNATURE				orporation submits this statement for the ration's board of directors. I hereby acce		ntment as	registered
SIGNATURE	Bignature, typed or printed name of registered ag-	on and the if applicable (NC	TE: Registpred Agent signature re-	quired when remetating)	DATE		
	Bignature, typed or printed name of registered ag OFFICERS AN				DATE CERS AND D		
SIGNATURE	Signature, typed or printed name of registered ag OFF ICERS AN PVST HULL, ALBERTA	ent and utic if applicable (NC ID DIRECTORS	TE: Registipred Agent signature re	quired when remetating)	DATE CERS AND D	IRECTOR	S IN 12
SIGNATURE 12. TITLE	Signature, typed or printed name of registered ag OFF ICERS AN PVST HULL, ALBERTA 3221 SW 17TH STREET	ent and utic if applicable (NC ID DIRECTORS	DE: Registered Agent signature re	quired when remetating)	DATE CERS AND D	IRECTOR	S IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST HULL, ALBERTA 3221 SW 17TH STREET FT LAUDERDALE FL 33312	ont and the if applicable (NC ID DIRECTORS DITETE	113. 1.1 TILLE 1.2 NAME 1.3 STHEEL ADDRESS 1.4 CITY-ST-ZIP	quired when remetating)	CERS AND D	IRECTOR Change	S IN 12
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14. I do 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.

CICNATURE.

MIALLE

7-27-90 MV.20-2442-128 NG-C2-1