SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

PROFIT CORPORATION ANNUAL REPORT
1997

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

FILED
97 DEC -3 AM 10: 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 97
DO NOT WRITE IN THIS SPACE

DOCUMENT # P95000007737 (6)

1. Corporation Name
IMPORT - EXPORT TRADING & PURCHASING INC.

Principal Place of Business
855 NW 24 STREET
MIAMI FL 33172

Mailing Address
355 NW 24 STREET
MIAMI FL 33172

3. Date Incorporated or Qualified: 01/30/1995
3a. Date of Last Report: 11/20/1996
4. FEI Number: 65-0553502 — Applied For / Not Applicable
5. Certificate of Status Desired: [X] — $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 [X] No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent
~~PICKNEY, CARLOS~~ SPELLED WRONG
355 NW 24 STREET
MIAMI FL 33127

10. Name and Address of New Registered Agent
81 Name: CARLOS PINCKNEY
82 Street Address (P.O. Box Number is Not Acceptable)
83: 355 NW 24 STREET
84 City: MIAMI FL 85 Zip Code: 33127

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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE D NAME PINCKNEY, CARLOS STREET ADDRESS 9448 N.W. 13TH ST. CITY-ST-ZIP MIAMI FL 33172	[X] DELETE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] DELETE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] DELETE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] DELETE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] DELETE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[ ] DELETE	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	PINCKNEY CARLOS 355 NW 24 ST MIAMI FL 33127	[X] Change [ ] Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		[ ] Change [ ] Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		[ ] Change [ ] Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		[ ] Change [ ] Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		[ ] Change [ ] Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		[ ] Change [ ] Addition

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****758.75 ****758.75

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.

SIGNATURE: Carlos Pinckney 9/11/97 (305) 571-0937

CR2E034 (4/97)