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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000020502 (7)

SAVE IMPORT & EXPORT INC.

J				
Principal Plac	e of Business	Mailing Address		L SADANDOL ANG TIGGAT BATHY DRIVE BELLE BEILE BATHY BATHY BOTHY BOTHY THAY TOWN
8514 N.W. 66 ST 8514 N.W. 66 ST		8514 N.W. 66 ST		
MIAMI FL 33		MIAMI FL 33166		DO NOT WRITE IN THIS SPACE
US		U\$		3. Date Incorporated or Qualified
				03/13/1995
2. Principal F	Place of Business	2e. Mailing Address		4. FEI Number Applied For
21		26		65-0511851 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired \$8.75 Additional
22		27		Fee Required
City & Stal	te	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23]	Country	Zip	Country	
24]	25	├ ¬ ` }	30	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Current		50,	10. Name and Address of New Registered Agent
CA	ASTADEDA, YLIET		81 Name	9
OF 44 MINI OO OT			82 Street	t Address (P.O. Box Number is Not Acceptable)
MIAMI FL 33166			52 Sheet	Address (F.O. Box Normber is Not Acceptable)
			83	
			84 City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above pared 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 adapt the objigations of Section 607.0505, Florida Statutes.				
\ \alpha \land \land \cdot \cd				
SIGNATURE	Signature, typod ir printed name of registeres agent		Registered Agent signature	re required when reinstaling) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	CASDAIPDA PATRICIA Change MAddition
NAME	DE CASTANEDA, SUSANA G		1.2 NAME	LEACL CW HE DOOR LE
STREET ADDRESS	692 STANTON DR.		1.3 STREET ADDRESS	
CITY-ST-ZIP	FORT LAUDERDALE FL 33326	OCCUPATE OF THE PARTY OF THE PA	1.4 CITY-ST-ZIP	MIAHI FL 33196
TITLE	i D Castaneda, Yuliet	☐ DELETE	2.1 TITLE	Change Addition
NAME CYDEET ADODESIG	8514 N.W-66 ST		2.2 NAME	15541 S.W 115 TERE
STREET ADDRESS	MIAMI FL		2.3 STREET ADDRESS	NIAM PL 33196
CITY-ST-ZIP	AMUNI LE	☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
City-st-zip			3.4. CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 City-St-ZiP	
TITLE		DELETE	5.1 TITLE	Change Addition
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			62 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 City - St - ZIP	'

14. I 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.

CIGNATURE.

United Stonied

02-25-9

(305)597-909-

FILED

Mar 09 1998 8:00am

Secretary of State