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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P95000023679	(0)
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ATLANTIC COAST IMPORT & EXPORT CO.

Principal Place of Business Mailing Address 41 NW 203RD TER 41 NW 203RD TER APT A-33 APT A-33 MIAMI FL 33169 MIAMI FL 33169 3. Date Incorporated or Qualified 3a. Date of Last Report 03/23/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 22 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing 23 \$5.00 May Be 28 \Box Trust Fund Contribution Added to Fees Zφ Country Country 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LANDABURU, BERNARDO Street Address (P.O. Box Number is Not Acceptable) 41 NW 203 TER A-33 MIAMI FL 33169 83 84 City 85 Zip Code 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agont signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Thus DELETE 1 1 TITLE ☐ Change ☐ Addition NAME LANDABURU, BERNARDO 1.2 NAME CR2E034 STREET ADDRESS 41 NW 203RD TER 1.3 STREET ADDRESS MIAMI FL 33169 CHY-SI-ZIP 1.4 CITY - ST-ZIP THE DEL ETE 2 1 TITLE Change ☐ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CHY-ST-ZIP 2.4 CITY - ST-ZIP $TiT_{i}F$ DELETE 3 1 TITLE ☐ Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIF 3.4 CITY-ST-ZIP TITLE DELETE 4. 1 TITLE ☐ Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-S1-ZIP

6 4 CITY - ST - ZIP 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 119.07(3)(K). 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 cath; 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 or on an attachment with an address

4.4 CITY - ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5 4 CITY - ST- ZIP

5 1 TITLE

52 NAME

6 1 TITLE

6.2 NAME

SIGNATURE:

TILLE

NAME

TILLE

NAME

STREET ADDRESS

STREET ADDRESS

City-St-ZiP

CITY ST-7IP

DELETE

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Change

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Addition

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