## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

P95000025248 (2)

ANGLO AMERICAN EXPORT, INC.

| Francipal Place of Business   | Mailing Address   |  |
|---|---|--|
| 30581 N.W. 46TH AVE.<br>APT. 203. BLDG. 11<br>LAUDERDALE LAKES FL 33313 | 30581 N.W. 46TH AVE.<br>APT. 203. BLDG. 11<br>LAUDERDALE LAKES FL 33313 |  |

|                        |   |                                     |   |  |               | 3. Date incorporated or Qualified 3a. Date of Last Report             |                                   |               |  |
|------------------------|---|-------------------------------------|---|--|---------------|---|-----------------------------------|---------------|--|
| 2. Principal Pla       | ce of Business  | 2a. Mailing Address                 |   |  |               | 4. FEI Number   | Applied Fo                        |               |  |
| 21 570,                | 1 COLLINS AVE   | 26 5/0/ 60                          | ollin   | SAU  | 12            | 15-2-71180  | Not Applica                       |               |  |
| Suite, Apt. #          |   | Suite, Apt. #, etc.  27             |   |  |               |   | \$8.75 Additiona                  |               |  |
| City & State           |   | City & State                        |   |  |               | 6. Election Campaign Financing  | \$5.00 May Be                     | $\overline{}$ |  |
| 23 1/1/4               | as 1 Breest Pl  | 28 MIDZII BiA                       | CH  | PC   |               | Trust Fund Contribution   | Added to Fees                     |               |  |
| Zip Country Zip Cou    |   |                                     | Cour  | itry   |               | 8. This corporation has liability for intangible tax under s 199.032, |                                   |               |  |
| 24 331                 | 3314 C 25 17.4 AK 29 32140 30 L   |                                     |   |  |               | Florida Statutes X Yes No   |                                   |               |  |
|                        | 9. Name and Address of Current i  | Registered Agent                    |   |  |               | 10. Name and Address of New Reg                                       | Istered Agent                     |               |  |
|                        |   |                                     |   | B1 Name  |               |   |                                   |               |  |
| LEDER, NATHAN I        |   |                                     | 62 Street Address (P.O. Box Number is Not Acceptable) |  |               |   |                                   |               |  |
| 5200 BLUE LAGOON DRIVE |   |                                     | 1   | Street Address (F.O. Box Number is Not Acceptable) |               |   |                                   | i             |  |
| SUITE 600              |   |                                     | Ī   | B3   |               |   |                                   | $\neg$        |  |
| MIAMI I                | MIAMI FL 33126  |                                     |   |  |               |   |                                   |               |  |
|                        |   |                                     |   | 84 City  |               |   | 85 Zip Code                       |               |  |
| 11. Pursuant to        | the provisions of Sections 607.050? ar  | nd 607.1508, Florida Statutes       | the abov  | e-named o  | orporati      | ion submits this statement for the nurror                             | ose of changing its registered of | office        |  |
| or registere           | d agent, or both, in the State of Florida.  I, and accept the obligations of, Section | Such change was authorized          | by the c  | orporation's                                       | board         | of directors. I hereby accept the appoin                              | tment as registered agent. I a    | m             |  |
|                        | i, and accept the obligations of, Section   | 1 607.0005, Florida Statutes.       |   |  |               |   |                                   | İ             |  |
| SIGNATURE :            | granute, typica or protectina in lot registered agent and                             | Onti- diaminoshi (NOTE              | - Banistarud  | laval élanahusi                                    | real ired in  | rhen reinstahing)   | DATE                              |               |  |
| 12.                    | OFFICERS AND I  |                                     | 13.   | governing according                                | . 0.40. 00 11 | ADDITIONS/CHANGES TO OFFICE   |                                   |               |  |
| THEF                   | D   | □ DELETE                            | 1. 1 [1]  | LF   | 1             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                               | Change Addit                      | tion          |  |
| NAME                   | PLACKS, MICHAEL A   | <b></b>                             | 1.2 NA  |  | 1             |   | A summy                           |               |  |
| STREET ADDRESS         | -3051 N.W. 46TH AVE: APT: 2   | <del>03, BLDG: 11-</del>            |   | EET ADDRESS  | ۰,+           | 701 0011 0  | 1.10 1.20 1                       |               |  |
| CHY-SI-ZIP             | LAUDERDALE LAKES FL 333   | 13                                  |   | Y-ST-ZIP   | 3             | And Ridge El  | 22 11/1/04                        |               |  |
| 71116                  | <b>D</b>  | □ DELFTE                            | 2.1 7!7   |  | 1.7           | 101 COLLINS A<br>1AM, BRACH FO  | - 33/43<br>M2 Channe □ Addit      | tion          |  |
| NAMÉ                   | DOWECK, DEBORAH R   |                                     | 2 2 NAI   |  |               |   | M Summy LI Moon                   |               |  |
| STHEET ADDRESS         | SOUS AN WEARTH AVE ADT SOS DUDG 44  |                                     |   | 2 3 STREET ADDRESS                                 |               | 101 COLL, NS AVE AMICA.  1A-mi BEACH FC 35/40                         |                                   |               |  |
| CiTY - \$1 - 2iP       | LAUDERDALE LAKES FL 333   | 13                                  |   |  | 3             | 10) (0(0)23 2   | OR APITOA.                        |               |  |
| TifeF                  |   | DELETE                              | 3 1 111   | Y-ST-ZIP   | 77            | TARRED DEACH  | ☐ Change ☐ Additi                 | tion          |  |
| NAME                   |   |                                     | 3 2 NA  |  | 1             |   | C Change C Audit                  | .100          |  |
| STREET ADDRESS         |   |                                     |   | reet address                                       |               |   |                                   |               |  |
| City-St-ZiF            |   |                                     |   |  |               |   |                                   |               |  |
| Tillif                 |   | TT DELETE                           | 4. 1 TIT  | Y - S1 - ZIP                                       | <del> </del>  |   | Change D Additi                   | tion          |  |
| NAME                   |   | Dotter                              |   |  |               |   | Change Additi                     | aon           |  |
| STEFF LADDRESS         |   |                                     | 4.2 NAI   |  |               |   |                                   |               |  |
|                        |   |                                     |   | EET ADDRESS  |               |   |                                   | ŀ             |  |
| CHY-SI-ZIP<br>ULF      |   | DELETE                              |   | Y - \$T - ZIP                                      | <b>.</b>      |   |                                   |               |  |
|                        |   |                                     | 5 1 111   |  |               |   | Change Additi                     | iion          |  |
| NAME<br>STOLEN STORES  |   |                                     | 5 2 NAI   |  |               |   |                                   |               |  |
| STREET ADDRESS         |   |                                     |   | EET ADDRESS  |               |   |                                   |               |  |
| CITY ST ZIP            | · · · · · · · · · · · · · · · · · · ·   | E DELEVE                            |   | Y-ST-ZIP   | ļ             |   |                                   |               |  |
| 11 <sup>T</sup> LF     |   | DELETE                              | 6 1 TIT   |  |               |   | Change 🗀 Additi                   | Gon           |  |
| NAME                   |   |                                     | 62 NAI  |  |               |   |                                   |               |  |
| STHEE! ACIDRESS        |   |                                     | 6.3 STF   | EET ADDRESS  |               |   |                                   |               |  |
| C(TY - S1 - 7)?        |   |                                     |   | Y-ST-ZIP   | ļ             |   |                                   | I             |  |
| 14. I do hereby        | cedry that the information supplied with  | n this tling is voluntarily furnisl | sed and o   | oes not aux  | alify for     | the exemption stated in Section 119.07                                | (3)/k) Florida Statutos I furtho  | 25            |  |

1. For heavy every what the information supplied with this hing is voluntarily turnished and does not quality for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 chapted, or on an attachment with an address.

SIGNATURE: HUMANOUL DOWEC

1 22 96 305 868 3323

CR2E034 (12/95