



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P95000030802 (9)

EXPORT COMPANY OF AMERICA, INC.



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SECRETARY OF STATE TALLAHASSEE, FLORIDA



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|---|---|----------------------------------|-----------------|--|-------------------|--|--|--|
| Principal Place of Business Mailing Address | | | | | | r annigen tim tinen mitte mater måter mante bermt meter meter annig meter finer mater | | |
| 633 SOUTH ANDREWS AVENUE 633 SOUTH ANDREWS AV SRD FLOOR 3RD FLOOR | | | | | | | | |
| FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 3330 | | | | | | Date incorporated or Qualified O4/13/1995 3a. Date of Last Report | | |
| 2. Principal Place of Business 2a. Mailing Address | | | | | | 4. FEI Number Applied For | | |
| 21 26 | | | | · | | 65-0573719 Not Applicable | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. 27 | | | | 5. Certificate of Status Desired S8.75 Additional Fee Required | | | | |
| City & State City & State 23 28 | | | | | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees | | |
| Zip | | | Cou | intry | | 8. This corporation has liability for intangible tax under s 199.032, | | |
| 24 | 25 29 30 | | | | | Florida Statutes Yes No | | |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent | | | | | | | | |
| | | | | 81 | Name | | | |
| HALE, R. ALAN 833 SOUTH ANDREWS AVENUE | | | | 82 | Street Addr | of Address (P.O. Box http://pris.line.com/pr | | |
| 3RD FLOOR * | | | | 83 | | ****915.00 *****915.00 | | |
| FT. LAUI | DERDALE FL 33301 | | | 84 | City | FL 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 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 glogations of Section 107,0105, Florida Statutes. | | | | | | | | |
| SIGNATURE 8/18/97 | | | | | | | | |
| SIGNATORE | Signature, typied or prince, name of registered ac- | rit end title lf epplicable (NOT | Tt: Flagistered | Agent | signature require | nd when reinstating? DATE | | |
| 12. | OFFICERS A | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | |
| TITLE | D | (X) DETEJF | 1.11 | ITLE | P, | ✓D □ Change 🛣 Addition | | |
| NAME | HALE, R. ALAN | | 1.2 Na | AME | H | ALE, MARY A. | | |
| STREET ADDRESS 633 SOUTH ANDREWS AVENUE 3RD FLOOR | | | 1.3 \$1 | STREET ADDRESS 633 South Andrews Avenue 3rd Floor | | | | |
| CITY-ST-ZIP | | | | 1.4 CITY-SI-ZIP Ft. Lauderdale, Ft. 33301 | | | | |
| TITLE | | ☐ DÉLFTE | 2. 1 TI | | D. | /VP/S ☐ Change X Addition ALE, R. ALAN | | |
| NAME | , | | 22 N/ | | 1 / | 33 South Andrews Avenue 3rd Floor | | |
| STREET ADDRESS | | | | | | · | | |
| CITY-ST-ZIP | | C I DELETE | | | I-ZIP LI | t. Lauderdale, FL 33301 | | |
| TITLE | | ☐ DELETE | 3. 1 Ti | | ļ | Change Addition | | |
| NAME STREET ÄDDRESS | | | 3.2 N/ | | ADDRESS | | | |
| | | | | | Į. | | | |
| CITY-ST-ZIP TITE | , | DELETE | 4. 1 T | 114-S1 | - ZIP | ☐ Change ☐ Addition | | |
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| STREET ADDRESS | | | | | ADDRESS | 1 | | |
| | ı | | 1 | | 1 | | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 5. 1] | ITY - ST | - 611 | ☐ Change ☐ Addition | | |
| NAME | | <u> </u> | 5.2 N/ | | | | | |
| STREET ADDRESS | | | | | ADDRESS ! | a alaw Grange Addition | | |
| CITY-ST-ZIP | | | 1 | ITY- ST | 1 | 1. alan | | |
| TITLE | | DELETE | 6. 1 Ti | | <u> </u> | Change □ Addition | | |
| NAME | | | 62 N/ | |) | 47/22702 | | |
| STREET ADDRESS | ı | | | | ADDRESS | 01691 | | |
| COY-ST-7/P | | | | IIY-SI | Ļ | - 1 / | | |

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 oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, of on an attachment with an address.

SIGNATURE:

R. Alan Hale, VP 8/18/97 954–462–2070

SIGNATURE: R. ALC
BIONATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

Daytime Phone #