SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/1/96: \$226 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE . CORPORATION Sandra B. Mormam ANNUAL REPORT Secretary of Stale DIVISION OF CORPORATIONS DOCUMENT #

1. Corporation Name P95000034394 (3) **B.J. EXPORT/IMPORT, INC.** Principal Place of Business Mailing Address CE, PLURIUA 3252 NW B4TH AVENUE STE 527 3252 NW 84TH AVENUE STE 527 SUNRISE FL 33351 SUNRISE FL 33351 3. Date Incorporated or Qualified 3a. Date of Last Report 05/03/1995 59 - 3 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Added to Fees Trust Fund Contribution Ζïρ Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 30 Yes No 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent JUNG; BRUNO-Business 3252 NW 84TH AVENUE STE 527 62 SSS (PO. Box Number is Not Acceptable) SUNRISE FL 33351 83 Zip Code 33 13 & 84 WIAMI 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 (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 410 DELETE PTD Change Addition TITLE 1.1 TITLE DANIEL BEC JUNG. BRUNO NAME 1.2 NAME 3435 MUIRFIELD DR **3252 NW 84TH AVENUE STE 527** 1.3 STREET ADDRESS STREET ADDRESS CO - 80907 - 7803 COLDRADO SPRINGIS. SUNDISE FL 89851 CITY - ST-ZIP 1.4 CITY - ST- ZIP DELETE TIT/ F **VSD** 2.1 DTLF Change Addition JUNG: LIDIA NAME 2.2 NAME 3252 NW 84TH AVENUE STE 527 STREET ADDRESS 2.3 STREET ADDRESS SUNRISE FL 33351 CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addilion TITLE 4.1 TITLE 300002236393-NAME 4. 2 NAME -07/11/97--01110--011 4.3 STREET ADDRESS STREET ADDRESS ****165.00 ****165.00 4.4 CITY - ST - ZIP CITY-ST-ZiP DELETE Change ___ Addition 5.1 T/U F TITHE NAME 5.2 NAME STAEET ADDRESS 5.3 STREET ADDRESS BITY-ST-ZIG 5.4 CITY - ST - ZIP DELETE 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 18 if changed, or on an attachment with an address. SIGNATURE: